## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000041645

1. Corporation Name

CONCORD ASSOCIATES, INC.

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90108 049 \*\*\*150.00



Principal Place of Business Mailing Address						I IMBITADO LIMITA MILLE MINITO NO	)	ice 41881 14813 Willi	#1##1 #111 <b>  19</b> #
4410 S.W. 74 AVENUE		685 WEST PARK DRIVE							
MIAMI FL 33155		SUITE #205 MIAMI FL 33172				DO NOT WRITE IN THIS SPACE			
		MIMMI FL 33172			3. D	Date Incorporated or Qual			
					0	06/03/1994			
2. Principal Pl	lace of Business	2a. Mailing Address			4. F	El Number		<u> </u>	plied For
21		26			6	65-0600565			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			<b>5.</b> C	Certifcate of Status Desire	ed 🗆	\$8.75 A Fee Re	
22		City & State				Latin Campaign Financ		\$5.00	
City & State	e	28				Election Campaign Financ Frust Fund Contribution	mg □	Added t	7
Zip	Country	Zip	Country	,		This corporation owes the	current year	Intangible	
24	[25]	29	0		1 7-	Personal Property Tax.		☐Yes	□No
	9. Name and Address of Curren	nt Registered Agent			10.	Name and Address of N	ew Registere	ed Agent	
			81	Name					
FONG, REBECA			82	Street A	Address (P.C	D. Box Number is Not Acc	ceptable)		
	WEST PARK DRIVE								
5011	TE 205 VII FL 33172		83	1					l
	WI FL 331/2		84	City			F	85 Zip (	Code
MIAN	to the association of Continue 607 050	22 and 607 1509 Florida Statutos	the above	e-named i	compression s	submits this statement for	r the purpose	of changing its	registered
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Florid	nonzed by la Statutes	tne corpo	corporation s oration's boa	ird of directors. Thereby a	the purpose accept the app	of changing its pointment as re	registered gistered
11. Pursuant office or nagent. I as	registered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida. Such change was autitions of, Section 607.0505, Florid	nonzed by la Statutes	tne corpo	equired when rein	ird of directors. Thereby a	DATE	pomunent as re	gistered
11. Pursuant office or reagent. I as	registered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida. Such change was auti- ations of, Section 607.0505, Florid at and title if applicable. (NOTE: R	norized by la Statutes egistered Ager	tne corpo	equired when rein	nstating)	DATE	pomunent as re	gistered
11. Pursuant office or nagent. Las	registered agent, or both, in the State im familiar with, and accept the obligation of the state	of Florida. Such change was autistions of, Section 607.0505, Floridation of the floridati	la Statutes	tne corpo	equired when rein	nstating)	DATE	AND DIRECTO	PRS IN 12
11. Pursuant office or nagent. I at SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the state of the obligation of the obliga	of Florida. Such change was autistions of, Section 607.0505, Floridation of the floridati	la Statutes legistered Aper 13. 1.1 TITLE 1.2 NAME	tne corpo	equired when rein	nstating)	DATE	AND DIRECTO	PRS IN 12
11. Pursuant office or nagent. I at SIGNATURE  12. TITLE NAME	egistered agent, or both, in the State in familiar with, and accept the obligation of registered age OFFICERS AN P FONG, REBECA	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: R)  ND DIRECTORS	egistered Ager  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	nt signature re	equired when rein	nstating)	DATE	AND DIRECTO	PRS IN 12
MIAN  11. Pursuant office or n agent. I at SIGNATURE  12. TITLE  NAME  STREET ADDRESS	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autistions of, Section 607.0505, Floridation of the floridati	egistered Ager 13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	nt signature re	equired when rein	nstating)	DATE	AND DIRECTO	PRS IN 12
MIAN  11. Pursuant office or nagent. I at SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: R)  ND DIRECTORS	egistered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	nt signature re	equired when rein	nstating)	DATE	AND DIRECTO	PRS IN 12
MIAN  11. Pursuant office or or agent. I at SIGNATURE  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: R)  ND DIRECTORS	la Statutes legistered Aper 13. 1.1 TITLE 1.2 NAME 1.3 STREE* 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	TADDRESS	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO	PRS IN 12
MIAN  11. Pursuant office or magent. I amount office or magent office or magent. I amount office or magent office or magent. I amount office or magent office or magent. I amount office or magent office or magent office or magent. I amount office or magent offi	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation (NOTE: RND DIRECTORS	egistered Ager  13.  1.1 ITILE 12 NAME 1.3 STREE* 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY-S	TADDRESS	equired when rein	nstating)	DATE	AND DIRECTO Change	PRS IN 12
MIAN  11. Pursuant office or nagent. I at signature  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: R)  ND DIRECTORS	egistered Ager  13.  1.1 ITILE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-S  3.1 TITLE	T ADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO	DRS IN 12 Addition
MIAN  11. Pursuant office or nagent. I at signature  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation (NOTE: RND DIRECTORS	egistered Ager 13. 1.1 ITILE 12 NAME 1.3 STREE: 1.4 CITY-S 2.1 ITILE 2.2 NAME 2.3 STREE: 2.4 CITY-S 3.1 ITILE	TADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change	DRS IN 12 Addition
MIAN  11. Pursuant office or nagent. I at signature  12. Title Name Street Address City-St-Zip Title Name Street Address City-St-Zip Title Name Street Address City-St-Zip Title Name Street Address Street Str	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation (NOTE: RND DIRECTORS	egistered Ager  13. 1.1 TITLE 12 NAME 1.3 STREE 14 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS ST-ZIP T ADDRESS T ADDRESS	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change	DRS IN 12 Addition
MIAN  11. Pursuant office or nagent. I at signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation (NOTE: RND DIRECTORS	egistered Ager 13. 1.1 ITILE 12 NAME 1.3 STREE: 1.4 CITY-S 2.1 ITILE 2.2 NAME 2.3 STREE: 2.4 CITY-S 3.1 ITILE	T ADDRESS ST-ZIP T ADDRESS T ADDRESS	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change	DRS IN 12 Addition
MIAN  11. Pursuant office or nagent. I at signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	egistered agent, or both, in the State in familiar with, and accept the obligation of registered age OFFICERS AN PONG, REBECA 685 W. PARK DRIVE, #205	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ager  13. 1.1 TITLE 12 NAME 1.3 STREE 14 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 3.1 TITLE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	DRS IN 12 Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Aper 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	DRS IN 12 Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Aper 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	nt signature re TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	DRS IN 12 Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Florid int and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ager 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE	nt signature re TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	DRS IN 12 Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation for, Section for, Section for, Section 607.0505, Floridation for, Section 607.0505,	egistered Ager  13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	IT ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation for, Section for, Section for, Section 607.0505, Floridation for, Section 607.0505,	egistered Ager 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	IT ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridation for Section 607.0505, Floridation	egistered Ager 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 2.4 CITY-S 3.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.3 STREE 5.4 CITY-S	IT ADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition
MIAN  11. Pursuant office or nagent. I at signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the o	of Florida. Such change was autitions of, Section 607.0505, Floridations of, Section 607.0505, Floridation for, Section for, Section for, Section 607.0505, Floridation for, Section 607.0505,	egistered Ager 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S 2.1 TITLE 22 NAME 23 STREE 2.4 CITY-S 3.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE	IT ADDRESS ST-ZIP T ADDRESS ST-ZIP	equired when rein	nstating) DDITIONS/CHANGES TO	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS