## 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 # P94000041784

1. Corporation Name

PEPPER PROPERTIES, INC.

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90278 029 \*\*\*150.00



	<del></del>						#1 (#11 #1#1 1##1
Principal Place	e of Business	Mailing Address				•	
2800 N. OCEAN		2800 N. OCEAN DR					
HOLLYWOOD F	L 33019	HOLLYWOOD FL 33019			DO NOT WRITE IN THIS S	DACE	
	• •	US			3. Date Incorporated or Qualifed	TAUL	
-	_	<u>.</u>			06/03/1994		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0502540	<del></del>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired		Additional===
22		27				Fee	Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23	<u></u>	28			Trust Fund Contribution		to Fees
Zip Country		Zip	_ Count	ry	8. This corporation owes the current year Intar		<b>N</b> e
24	25	29 30	0		**************************************	∐ Yes	No
	9. Name and Address of Curr	ent Registered Agent		G1	10. Name and Address of New Registered A	gent	
CALL	NDERS, JOHN M.		18	Name			
2800 N. OCEAN DRIVE HOLLYWOOD FL 33019		8	Street Add	ress (P.O. Box Number is Not Acceptable)			
			L				
NUL	FIMOOD LF 22018		8	13			
			8	34 City	FL	85 Zip	Code
44 5	to the consistence of Spetians COZ O	ED2 and SD7 1E09 Florido Statutas	the abo	wo named con	poration submits this statement for the purpose of cl	hanging i	ts registered
office or n	agistared agent or both in the Sta	te of Florida. Such change was autr gations of, Section 607.0505, Florid	norized t	ny tha comonati	ion's board of directors. I hereby accept the appoint	ment as	registered
SIGNATURE							
	Signature, typed or printed name of registered a	<u> </u>		gent signature requin	ad when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12
12.	PT	AND DIRECTORS	13.			Change	
TITLE	JOHN M. SAUNDERS	- DEFE !					
NAME	2800 N. OCEAN DR	.*	1,2 NAM	]			
STREET ADDRESS				EET ADORESS			
CITY-ST-ZIP	HOLLYWOOD FL	DELETE		-ST-ZIP		Change	e [ ] Addition
TITLE	VPS	□ bete≀e	2.1 TITLE				٠٠٠٠٠٠٠٠
NAME	LINDA C. SAUNDERS		2.2 NAM				
STREET ADDRESS	2800 N. OCEAN DR			EET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			r-ST-ZIP		Change	e Addition
TITLE		☐ DELETE	3.1 TITLE	į.		change	
NAME			3.2 NAM		•		
STREET ADDRESS	·		3,3 STR	EET ADDRESS			
CITY-ST-ZIP				/-ST-ZIP		[]Chan-	
TITLE		☐ DELETE	4,1 TITLE	1		Change	e
NAME			4, 2 NAM	AE			
STREET ADDRESS	· · ·		4.3 STR	EET ADDRESS			
CITY-ST-ZIP			4,4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL			Change	e
NAME	·		5.2 NAM				
STREET ADDRESS			5.3 STR	EET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL	E		Change	e
NAME	,		6.2 NAM	E			
STREET ADDRESS			6.3 STR	EET ADDRESS			
CITY-ST-ZIP			6,4 CITY	-ST-ZIP			

CITY-ST-ZIP 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.

SIGNATURE: