PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000043282

ARACHNID CORP.

					—	1 01300 51110 11001 10110 114	JI (88)
Principal Place of Business Mailing Address							
22221 SANDS POINT DR. 22221 SANDS POINT DR.					·		
BOCA RATON FL 33433		BOCA RATON FL 33433			DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualifed		
ı					06/09/1994		ļ
a Dissipal Di	and of Business	2a, Mailing Address			4. FEI Number	Applied F	or
2. 1 1110 par 1 1000 01 200 110					65-0497360	Not Appli	icable
£11'		Suite, Apt. #, etc.	etc.			\$8.75 Addition	nal
	#, etc.	27	_		5. Certifcate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Count	try	8. This corporation owes the current year li	ntangible	-
├ ─ ┐ `	25	29 3	0		Personal Property Tax.	¥Yes □No	,
24	9. Name and Address of Curren				10. Name and Address of New Registere	d Agent	
	3, 1141110 2114 1144		8	Name			
SERLE, STEVEN			-	22 Circuit Add	drace (P.O. Box Number is Not Accentable)		
2101 CORPORATE BLVD			18	82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 325			{	33			
BOCA RATON FL 33431			L	85 Zip Code			
			8	34 City	F	Zip Code	
	60 1 007 050	22 and 507 1509 Florida Statutes	the abo	nve-named corr	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its regist	ered
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the obliga				on's board of directors. I hereby accept the app		_
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	egistered A	gent signature require	ed when reinstating) DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		Addition
TITLE	P	☐ DELETE	1.1 TITL	E	#1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change L	Addition
NAMÉ	RICHARDS, RANDY		1.2 NAM	1E			
STREET ADDRESS	AAAAA AAAAAA BABIT DOBAT		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY	r-ST-ZIP			4.189
TITLE	STD	☐ DELETE	2.1 TITL	E		☐ Change . ☐	Addition
NAME	ELIZABETH RICHARDS		2.2 NAM	Æ			
STREET ADDRESS	AAAAA AAAAAA BAAAAT DO		2.3 STR	EET ADDRESS			ŀ
CITY-ST-ZIP	BOCA RATON FL 33433	•	2.4 CIT	Y-ST-ZIP			
TITLE	BOOM WITCH 12 00 100	☐ DELETE	3.1 TITL	E		☐ Change ☐	Addition
NAME			3.2 NAM	AE			
				REET ADORESS	1000000000000000000000000000000000000	out the factor with	60° 886
STREET ADDRESS	~ ~			Y-ST-ZIP		<u> 1. [4] 特别的</u>	$_{22}$ \cdot 2
CITY-ST-ZIP		☐ DELETE	4.1 TITL		1000 1000 1000 1000 1000 1000 1000 100	Change · "	Addition
TITLE			4, 2 NA				
NAME				REET ADDRESS		5.	
STREET ADDRESS	3 `		•	Y-ST-ZIP		•	
CITY-ST-ZIP		□ DELETE	5.1 TITI			☐ Change ☐	Addition
TITLE		ن ميدداد	5.1 IIII		The state of the state of		
NAME	1			REET ADDRESS		<i>5-</i>	
STREET ADDRESS			0.5 311	CC, ADDITION			2

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.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE



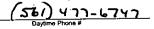
DELETE

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90061 043 ***150.00



☐ Change

Addition