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

Mailing Address

C/O MILTON J. WALLACE

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P940000532	99
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Principal Place of Business C/O MILTON J. WALLACE

ROSENTHAL FINANCIAL SERVICES OF FLORIDA, INC.

2222 PONCE DE CORAL GABLES	DE LEON BLVD., SUITE 303 2222 PONCE DE LEON BLVD., SUITE 303			13	DO NOT WRITE IN THIS SPACE				
- -	_				3. Date Incorporated or Qualifed				
clo Mi	LTON J. WALLACE	C/o Milton Ju	NAL	LACE	07/14/1994				
2. Principal Pla	Principal Place of Business 2a. Mailing Address			4. FEI Number Applied For					
21 12001	Brickell Ave.	26 1200 BRICKELLAVE			65-0507408	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc.					F Contiforto of Status Desired	8.75 A	1		
22 SuiTe#1720 27 SuiTe#1720			10_		5. Certificate of Status Desired Fee Required				
City & State City & State					6. Election Campaign Financing \$5.00 May Be				
23 MIAMIFLA. 28 MIAMI, FLA.					Trust Fund Contribution	Added to	Fees		
Zip	Country	1	Country		8. This corporation owes the current year Intangit	e .			
24 <i>33131 -</i>	3357 25 U.S.M.		u,	5,A1	Personal Property Tax.		No		
	9. Name and Address of Current	Registered Agent	_		10. Name and Address of New Registered Ager	1t			
			81	Name			ļ		
THE PRENTICE HALL CORPORATION SYSTEM, INC.			82	Street Ad	Iress (P.O. Box Number is Not Acceptable)				
1201 HAYS ST.			<u> </u>						
SUITE: 105			83						
TALLAHASSEE FL 32301			84	City	85	Zip C	nde		
market in the second se			- 1	,	FL \	ļ. `			
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, th	ne abov	-named co	rporation submits this statement for the purpose of char	ging its r	egistered		
office or re	egistered agent, or both, in the State of in familiar with, and accept the obligation	Florida. Such change was author ons of Section 607,0505. Florida (nzed by Statutes	tne corpora	tion's board of directors. I hereby accept the appointme	in as reg	stered		
-	, pri		-				[
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOTE: Regis	stered Ager	it signature requ	ired when reinstating) DATE				
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DI				
TITLE	AS	☐ DELETE	1.1 TITLE	{		Change	Addition		
NAME	BOYLE JANET		1.2 NAME	}			}		
STREET ADDRESS	1370 BROADWAY	Y 1.31		ADDRESS					
CITY-ST-ZIP	NEW YORK NE		1.4 CITY-S	T- ZIP					
TITLE	S	☐ DELETE	2.1 TITLE			Change	Addition		
NAME	PONTICELLO, LORETTA	į:	2.2 NAME	{			ĺ		
STREET ADDRESS	ACTO PROADMAN		2.3 STREE	ADDRESS			ļ		
CITY-ST-ZIP	NEW YORK NY	į.	2. 4 CITY-9	T-ZIP					
TITLE		DELETE :	3.1 TITLE			Change	☐ 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.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

☐ DELETE

□ DELETE

4/29/99

Change

Change

Change

Addition

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Addition

FILED

May 06, 1999 8:00 am Secretary of State

05-06-1999 90007 037 ***150.00

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