Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90056 028 \*\*\*150.00

## 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 # P94000061917

1. Corporation				_			
F.D.S.M. CORPORATION							
					( <b>186)(186</b> ) (18 <b>0</b> (187)(187)(187)(187)(187)(187)	(10 B) (11 11 B) (11 11 B) (11 B) (11 B)	
Principal Place of Business Mailing Address						)	
3000 N.E. 30TH PLACE 3000 N.E. 30TH PLACE					Jan San San San		
SUITE 207 SUITE 207				DO NOT WRITE IN THIS SPACE			
FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306					3. Date Incorporated or Qualifed	III OF AGE	
					08/22/1994		
2. Principal Place of Business 2a. Mailing Address				_	4. FEI Number	Applied For	
					65-0527501	Not Applicable	
21   26   Suite, Apt. #, etc.   Suite, Apt. #, etc.						\$8.75 Additional	
22 27					5. Certifcate of Status Desired	Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	<del></del>	8. This corporation owes the current year		
24	25	29 30	0		Personal Property Tax.	☐ Yes ☐ No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	id Agent	
EL 0.5	NO ALEBED		81	Name			
FLORIO, ALFRED			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
3000 NE 30TH PLACE						_	
SUITE 207			83				
FT. LAUDERDALE FL 33306			84	City		85 Zip Code	
					F		
office or re	poistered agent, or both, in the State o	if Florida. Such change was auti	orizea by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as registered	
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statutes				
SIGNATURE					t when reinstating) DATE		
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	nt signature required	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
12.	PTD	DELETE	1.1 TITLE		ADDITIONO/OFFINITOED TO COLUMN	☐ Change ☐ Addition	
NAME			1.2 NAME	{			
STREET ADDRESS			1	ADDRESS		}	
LIGHT MARCH EL PARCE ET LAUNGANALO .333061.			1.4 CITY-S				
CITY-ST-ZIP TITLE			2.1 TITLE	1 447		☐ Change ☐ Addition	
NAME			2.2 NAME				
STREET ADDRESS	ACCOUNT OF ACT OFFICE			TADORESS			
CITY-ST-ZIP	ET LAUDEDDALE EL ACODO		2.4 CITY-S	- 1			
TITLE			3.1 TITLE		The state of the s	☐ Change - ☐ Addition	
NAME	3.2		3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP	<b>_</b>		3.4. CITY- S	ST-ZIP			
TITLE	☐ DELETE		4.1 TITLE			☐ Change ☐ Addition	
NAME			4. 2 NAME			ļ	
STREET ADDRESS			4.3 STREE	TADORESS			
CITY-ST-ZIP	I		4.4 C/TY-S	T-ZIP			
TITLE	☐ DELETE 5.		5.1 TITLE			☐ Change ☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS	REET ADDRESS		5.3 STREE	TADORESS			
CITY-ST-ZIP_	11-31-2IP		5.4 CITY-S	T-ZIP			
			6.1 TITLE			☐ Change ☐ Addition	
NAME			62 NAME			ļ	

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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, of on an attachment with a address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP