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**

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90024 016 ***150.00

DOCUMENT # P9400064237

1. Corporation Name

FORTUNE INVESTMENTS, INC.

										4 1 1 1 1 1 1 1 1 1
Principal Place of Business		Mailing Address				- 11	*************************	**** ##117 ##111 ##11#		
6000 PARK OF COMMERCE BLVD. SUITE A		6000 PARK OF COMMERCE BLVD. SUITE A								
BOCA RATON FL 33487		BOCA RATON FL 33487				DO NOT WRITE IN THIS SPACE				
					3.		corporated or Qual	lifed		
							<u>/1994</u>			
2. Principa Pl	ace of Business	2a. Mailing Address			4.	FEI Nu			<u> </u>	plied For
21		26				65-05	<u> 15445 </u>			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certifo	ite of Status Desire	ed 🗌	\$8.75	
22									Fee Re	
City & S:ate		City & State			6.		n Campaign Financ	ing [\$5.00	
23		28					und Contribution		Added	c Fees
Zip	Country	Zip	Country	/	8.		rporation owes the	current year in		[7].
24	25	29	30				al Property Tax.		Yes	□No
	9. Name and Address of Curren	t Registered Agent		T No. 14	10.	Name	and Address of N	ew Registered	Agent	
DC:O	POTRATION CORRODATION OF E	I ODIDA INC	81	Name	Kou	+4	ubosij	Tames		
REGISTRATION CORPORATION OF FLORIDA INC. 22422 THOUSAND PINES LANE			82	Street A	cdress (F		No. of the Australia			12 1
					<u>10001</u>	D P	W C OF C	<u>om m.</u>	erce	121Va
BUU	A RATON FL 33428		83	·	Su	1 Fe	A			
			84	City			<u> </u>		85 _Zip	Code
			1	"	130 C	ak	laton_	FL	<u> 33</u>	187
11. Pursuant to office or reagent.	to the provisions of Sections 607.050; egistered agent, or bo h, in the State m familiar with, and accept the obligat	2 and 607.1508, Florida Statu of Florida. Such change was tions of, Section 607.0505	utes, the above outholized by forida Statute	the corpo	ccrporations be	n submit pard of t	s this statement for irectors. I hereby a	r the purpose of accept the appo	f changing its intment as re	registered g stered
SIGNATURE	JAMES KOUTS!	nuros /	famo	is let	oute	out	1	4/26	199	
	Signature, typed or printed na ne of registered agen		. Registered Age	int signature re				DATE	, ·	
12.	OFFICERS AN	t) DIRECTORS	13.	<u></u>		ADDITIO	NS/CHANGES TO	OFFICERS A		
TITLE	DP	☐ DÉCÉTE	1.1 TITLE						Change	☐ Addition
NAME	KOUTSOUBOS, JOHN		12 NAME							
STREET ADDRE 3S	6000 PARK OF COMMERCE BI	LVD	1.3 STREE	TADDRESS						
CITY-ST-ZIP	BOCA RATON FL 33487		1.4 CITY-	ST-ZIP						
TITLE	DS	☐ DELETE	2.1 TITLE						Change	Addition
NAME	KOUTSOUBOS, JAMES		2.2 NAME	Ì						
STREET ADDRESS	6000 PARK OF COMMERCE BI	LVD	2.3 STREE	T ADDRESS						
C/TY-ST-ZIP	BOCA RATON FL		2. 4 CITY-	ST-ZIP	_					
TITLE		☐ DELETE	3.1 TITLE						Change	☐ Addition
NAME			3.2 NAME	j						
STREET ADDRESS			3.3 STREE	T ADDRESS						
CITY-ST-ZIP			3.4 CITY-	ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE						Change	☐ Addition
NAME		4. 2 NAMI								
STREET ADDRESS		4 3 STREET ADD		T ADDRESS						
CITY-ST-ZIP			4.4 CITY-	ST-ZIP						_
TITLE	DELETE		5.1 TITLE				-		Change	Addition
NAME			52 NAME	-						
STREET ADDRESS			5.3 STREE	T ADDRESS						
CITY-ST-ZIP			5.4 CITY-	ST-ZIP						
DITE	 	☐ DELETE	6.1 TITLE					-	Change	Addition
			6.2 NAME							
NAME				T ADDRESS						
STREET ADDRESS			3.3 5 INE	,						

64 CITY-ST-ZIP

14. 1 hereb / 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 indicate d 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 recuired 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.

SIGNATUR

CITY-ST-ZIP