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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400073709

AMVEST PROPERTIES GROUP, INC.

Principal Place	e of Business	Mailing Address			**************************************	HOUSE STATE	arua difil d u di	
1061 SW 20TH ST 1061 S		1061 SW 20TH ST BOCA RATON FL 33486	061 SW 20TH ST		DO NOT W	RITE IN THIS	SPACE	
		•			3. Date Incorporated or Qualife		SFACE	
•					10/03/1994			- 1
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26	•		65-0556280		→	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional
22		27			5. Certifcate of Status Desired	Ш	Fee Re	equired
City & State	е	City & State			6. Election Campaign Financin	9 🗆	\$5.00	May Be
23	•	28			Trust Fund Contribution		Added t	o Fees
Zip	. Country	Zip	Country	/	a. This corporation owes the c	urrent year Inta		_
24	25	29	30		Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Current				10. Name and Address of Nev	v Registered A	Agent	
CDIE	FITH, MARK	A. Autologia	81	Name				
	S.W. 20TH ST		82	Street A	Address (P.O. Box Number is Not Acce	ptable)		
	A RATON FL 33486				ر دو درو ۱۸ م کار در درو در درو درو درو درو درو درو درو	e de un de la		at. +- na. [24] , 12, 24]
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			84	City		EI	85 Zip (Code
						FL		
1004 (000)				<u> </u>			obonaina ita	rogistored
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office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	if Florida. Such change was	authorized by	the corpor	corporation submits this statement for t ration's board of directors. I hereby ac	ne purpose of cept the appoin	changing its itment as re	registered gistered
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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

SIGNATURE:

FILED

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90058 006 ***150.00