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May 03, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000086215

1. Corporation Name
7826 NW 40 COURT, INC.



Principal Place of Business

3375 N COUNTRY CLUB DR
APT PH6
MIAMI FL 33180
US

Mailing Address

3375 N COUNTRY CLUB DR
APT PH6
MIAMI FL 33180
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/29/1994

4. FEI Number

65-0539344

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

CANARICK, BERNARD D
8411 WEST OAKLAND PARK BLVD
SUITE 118
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81 Name Steve Spry
82 Street Address (P.O. Box Number is Not Acceptable)
8105 NW 94th Ave.
83
84 City TAMARAC FL 85 Zip Code 33321

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Steve Spry

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-99

12. OFFICERS AND DIRECTORS

TITLE DP
NAME CANARICK, BERNARD D
STREET ADDRESS 1776 N PINE ISLAND RD SUITE 118
CITY-ST-ZIP PLANTATION FL 33322

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME ARDYTH J Spry
1.3 STREET ADDRESS 8105 NW 94th Ave
1.4 CITY-ST-ZIP TAMARAC, FL 33321

2.1 TITLE
2.2 NAME STEVE SPRY
2.3 STREET ADDRESS 8105 NW 94th Ave
2.4 CITY-ST-ZIP TAMARAC, FL 33321

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE REQUIRED Spry

4-29-99 (954) 726-9233

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)