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 # P94000087131

1, Corporation Name

2052 CORPORATION

		•	•
Principal Place of Business	 	-	Mailing Address
11462 S.W. 87TH TERRACE MIAMI FL 33173			11462 S.W. 87TH TERRACE
MIAMI PL 331/3			*MIAMI FL 33173

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90048 027 ***150.00



DO NOT WRITE IN THIS SPACE

						3. Date Incorporated or Qualifed			
2 Principal	Diace of Business	a Mailine Adding			***	11/30/1994			
Z. Pinicipal i	cipal Place of Business 2a. Mailing Address					4. FEI Number	A	oplied For	
<u>[1]</u>	26					65-0550250	No	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75	Additional	
22 27						5. Certificate of Status Desired	Fee Re	equired	
City & Sta	-City & State City & State				,	6 Election Campaign Financing	\$5.00	May Be	
23						Trust Fund Contribution		to Fees	
Zip	Country Zip			ntry		8. This corporation owes the current year Inta			
4	25 29					Personal Property Tax.			
4 25 29 3 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
				81	Name		· y- ···		
	in, Brent d		Į.	\Box				ļ	
801	801 BRICKELL AVE.			82	Street Address (P.O. Box Number is Not Acceptable)				
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	MI FL 33131			83			的轉換	贈問類	
4			}	84	City	The first of the Section 1971 - Performance 1980 - 1981 -	85 Zip (11(5' 18) 1881 2000 11 24	
215000		Astron. Company	1		•	FL			
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the ab	ove-i	named corpo	pration submits this statement for the purpose of co	hanging its	registered	
	registered agent, or both, in the State of am familiar with, and accept the obligation				ne corporation	n's board of directors. I hereby accept the appoin	tment as re	gistered	
		5/10 01, CODUCT 007,0000, 11	onda otatu	nes.		·		J	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOT	E: Danieterad /	A sont e	ion at use security of	when reinstating) '{ } } }			
12.	OFFICERS AND		13.	Agent s	signature required			{	
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NAME			1				Change	Addition (
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11-01-2IF /	artifut that the information available with		0.4 CITY-	-31-Zli	IT				

this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information youal report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in sequential other like empowered. indicated on this annual report or supplemental an officer or director of the corporation or the receive Block 12 or Block 13 if changed yor on an attachm