## 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 # P94000089634

1. Corporation Name

BONSAI BEGINNINGS, INC.

## **FILED** Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90046 009 \*\*\*150.00



Principal Place of Business	Mailing Address						
8115 SOUTHERN BLVD. UNIT 1 W PALM BEACH FL 33411	8115 SOUTHERN BLVD. UNIT 1 W PALM BEACH FL 33411			DO NOT WRITE IN TH	S SPACE		
				3. Date Incorporated or Qualifed 12/08/1994			
2. Principal Place of Business	2a. Mailing Address	-		4. FEI Number 65-0542066	Applied For Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be Added to Fees		
Zip Country 24 25	Zip 30	Country		This corporation owes the current year Personal Property Tax.	ntangible ☐ Yes ☐ No		
9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registere	d Agent		
STARR, JIM 6061 WEST GUN CLUB RD. W PALM BEACH FL 33415			81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83				
		84	City	F			
<ol> <li>Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli</li> </ol>	ite of Florida. Such change was author	rized by ti	named corpo he corporation	pration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing its registered ointment as registered		
SIGNATURE	AIOTE Pari		alacatura manurad	udon vainetaling)			

SIGNATURE	Signature, typed or printed name of registered agent and title if applical	ole. (NOTE: F	Registered Agent signature required	d when reinstating) DATE				
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	P	DELETE	1,1 TITLE	☐ Change	☐ Addition			
NAME (	STARR, JIM		1.2 NAME					
STREET ADDRESS	6061 WEST GUN CLUB RD.		1.3 STREET ADDRESS					
CfTY-ST-ZiP	WEST PALM BEACH FL 33415		1.4 CITY-ST-ZIP					
TITLE	ST	☐ DELETE	2.1 TITLE	☐ Change	☐ Addition			
NAME	STARR, LOUISE		2.2 NAME		ļ			
STREET ADDRESS	6061 WEST GUN CLUB RD.		2.3 STREET ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL 33415		2. 4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE	☐ Change	☐ Addition			
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE	···	DELETE	4.1 TITLE	☐ Change	☐ Addition			
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP	·		4,4 CITY-ST-ZIP					
TITLE		□ DELETE	51 TITLE	☐ Change	Addition			
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE	-	DELETE	6.1 TITLE	☐ Change	☐ Addition			
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			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 supplied with this limit does not quality for the exemption stated in Section 119.07(3)(i), Fronta statutes. Himmer certify that the mitoritation 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 addition, with all other like empowered.

SIGNATURE: