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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # **P94000090695**

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90029 011 ***150.00

NORMAN A. GREEN, P.A.								
Principal Place of Business	Mailing Address				- I SEMITEM ING INCH GIÐU DA	ita månst omsti omtig	(Alti mutim atte	8 (BIB) B()) (BB)
1245 20TH ST.					DO NOT	WRITE IN THIS	SPACE	
					3. Date incorporated or Qual	ifed		
					01/01/1995			
2. Principal Place of Business	2a. Mailing Address				4. FEI Number		A	pplied For
	26				65-0542861			ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			-	5. Certificate of Status Desire	d ⁻ □		Additional
22	27				3. Cormodio di 4 .			equired
City & State	City & State				6. Election Campaign Finance	^{ing} □	•	May Be
23	28				Trust Fund Contribution			to Fees
Zip Country	Zip	Coun	ıtry		8. This corporation owes the	current year Int	angible Yes	□No
24 25	29	30			Personal Property Tax. 10. Name and Address of No.	w Registered		
9. Name and Address of Currer	it Registered Agent		81	Name	10. Harrie and Addition of the			
GREEN, NORMAN A		L	j					
1245 20TH ST.			82	Street Addre	ess (P.O. Box Number is Not Acc	eptable)		
VERO BEACH FL 32960		ŀ	83			<u>. · · · · · · · · · · · · · · · · · · ·</u>	-	
			Щ.	***			T-1	
		1	84	City		FL	_ 85 Zip	Code
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida. Such change was a	autnorizea	DV UI	named corpo le corporation	oration submits this statement for on's board of directors. I hereby a	ccept the appoi	intment as r	egistered
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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 suppliemental 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: