## 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 # 1. Corporation Name P95000030742

1.2 NAME			•	
1.3 STREET ADDRESS	•			- 1
14 CITY- ST- ZIP				
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**FILED** Jan 27, 1999 8:00am **Secretary of State** 

01-27-1999 90022 034 \*\*\*150.00

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Data dia 1.0°	and Divisions	Mailing Address				
•	ce of Business	Mailing Address			• 1 111	
2300 ALT A1	A1A 12300 ALT A1A 209					
209 PALM REACH	LM BEACH GARDENS FL 33410 PALM BCH GDNS FL 33410		DO NOT WRITE IN THIS	SPACE		
JS			3. Date Incorporated or Qualifed			
					04/19/1995	
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
1		26		65-0577177	Not Applicable	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ite .	City & State		6. Election Campaign Financing	\$5.00 May Be	
3		28			Trust Fund Contribution	Added to Fees
Zip	. Country	Zip	Country		8. This corporation owes the current year Inte	
4]	25	29	30		Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curre			1	10. Name and Address of New Registered	Agent
		的。 第二章 1000年 1000	81	Name		
WESTERMARCK, JOEL C MAN 1040 SALMON ISLE WEST PALM BEACH FL 33413		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
		83		130% 姓氏系统整治的影片	<b>国际编辑</b>	
	•		84	City	124年,加州安全的建筑的124年2月,2017年2日 124日 - 124日 - 1	85 Zip Code 5
			04	City	FL	2ip Code
SIGNATURE	Signature, typed or printed name of registered ago	ND DIRECTORS	13.	nt signature required	d when reinstating) (1997) DATE  ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	STD	☐ DELETE	1.1 TITLE	1	57 - 317 37.	Change Addition
NAME	JOEL WESTERMARCK		1.2 NAME			
STREET ADORESS	1040 SALMON ISLE		1.3 STREE	TADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL	C ARLETE	1.4 CITY- S	T-ZIP		Change Addition
TITLE	DP	. DELETE	2.1 TITLE			☐ Cliarige ☐ Addition
NAME	D'ONOFRID, ANDREW		2.2 NAME		•	1
STREET ADDRESS	19000 MICHINIOUN CENTO NO	•		TADORESS		
CITY-ST-ZIP	TEQUESTA FL	DELETE	2.4 CITY-5	5T-ZIP		☐ Change ☐ Addition
ntle e GGS	DESCRIPTION AND A CONTROL	» • E UCLCIE	3.1 TITLE			
VAME	Paragraph .		3.2 NAME	TADDRESS		
STREET ADDRESS					· · · · · · · · · · · · · · · · · · ·	法信息证据
city-st-zip* ** Title		□ DELETE	3.4. CITY-5	01-ZIP		Change Addition
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STREET ADDRESS			4 J NAME	1		į
CITY-ST-ZIP:		(A)** (A)	4.2 NAME	TADDRESS		1
	1 - 17 - 22 - 22 - 2 - 2 - 2 - 2 - 2 - 2 - 2	23	4.3 STREE	T ADDRESS		
TILE			4.3 STREE 4.4 CITY-S			☐ Change ☐ Addition
		De transporter de la companya de la	4.3 STREE			☐ Change ☐ Addition
NAME		De transporter de la companya de la	4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME		Not the state of t	Change Addition
TTILE NAME STREET ADDRESS CITY- ST-ZIP	\$ \$10	De transporter de la companya della companya della companya de la companya della	4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T-ZIP	Arry 345	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		De transporter de la companya della companya della companya de la companya della	4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE	T-ZIP		Change Addition
NAME	SID	At C □ DELETE	4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T-ZIP	Andrew 241.	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	SID JOHN WEST-THEFT IN 1540 A COLUMN IN	At C □ DELETE	4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T-ZIP		

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 of on an attachment with an address, with all other like empowered.