

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

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90023 017 ***150.00

DOCUMENT # P95000036579

1. Corporation Name
SUZARD, INC.

Principal Place of Business
2278 SW OLYMPIC CLUB TERR
PALM CITY FL 34990

Mailing Address
2278 SW OLYMPIC CLUB TERR
PALM CITY FL 34990

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/09/1995

4. FEI Number
65-0621942

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 5486 S.W. ORCHID BAY DR.

Suite, Apt. #, etc.

22 City & State
PALM CITY FL. 34990

23 Zip Country
34990 U.S.A.

2a. Mailing Address

26 5486 S.W. ORCHID BAY DR.

Suite, Apt. #, etc.

27 City & State
PALM CITY, FLA.

28 Zip Country
34990 U.S.A.

9. Name and Address of Current Registered Agent

WEINSTEIN, HOWARD
2278 SW OLYMPIC CLUB TERR
PALM CITY FL 34990

10. Name and Address of New Registered Agent

81 Name
HOWARD WEINSTEIN
82 Street Address (P.O. Box Number is Not Acceptable)
5486 S.W. ORCHID BAY DRIVE
83
84 City
PALM CITY FL 85 Zip Code
34990

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME WEINSTEIN, HOWARD
STREET ADDRESS 2278 SW OLYMPIC CLUB TERR
CITY-ST-ZIP PALM CITY FL 34990

TITLE VP ☐ DELETE

NAME WEINSTEIN, SUSAN
STREET ADDRESS 2278 SW OLYMPIC CLUB TERR
CITY-ST-ZIP PALM CITY FL 34990

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 5486 S.W. ORCHID BAY DRIVE
1.4 CITY-ST-ZIP PALM CITY, FLORIDA 34990

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 5486 S.W. ORCHID BAY DRIVE
2.4 CITY-ST-ZIP PALM CITY, FLORIDA 34990

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

HOWARD WEINSTEIN

1/14/99 (561) 220-6989

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (11/98)