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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000037097 1. Corporation Name

AUCTIONSHAUS PRINCE OF SAXONY, INC.

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Principal Place of Business	-		Mailing Address
2800 ISLAND BLVD #604 AVENTURA FL 33160	1		2800 ISLAND BLVD #60 AVENTURA FL 33160
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## **FILED** Feb 06, 1999 8:00am **Secretary of State**

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	•	•			05/08/1995	Qualifou			
				4. FEI Number		17	Applied For	┥	
2. Principal Place of Business 2a. Mailing Address				65-0593246		<u> </u>	Not Applicable	<b>-</b>   %	
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Suite, Apt. #, etc.				5. Certificate of Status D	esired -		Required		
22		27 City & State		<del></del>	6. Election Campaign F	inancing	\$5.0	0 May Be	
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Zip	Country	<b>⊢</b> '	30	,	Personal Property Ta		_ Yes	<b>□</b> ₩0	
24	9. Name and Address of Curre	29 29 Agent	130		10. Name and Address		stered Agent		
<u> </u>	9. Name and Address of Curre	As A. C. C. A. S. A.	8	1 Name	<u></u>				Ì
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			8	4 City			FL 85 Z	ip Code	
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11. Pursuant office or re	to the provisions of Sections 607.05	502 and 607.1508, Florida Sta te of Florida. Such change was	tutes, the abo authorized b	ve-named cor y the corporat	tion's board of directors. I her	eby accept th	e appointment as	registered	
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	502 and 607.1508, Florida Sta te of Florida' Such change was gations of, Section 607.0505, F	tutes, the abo s authorized b Florida Statute	ve-named cor y the corporat es.	tion's board of directors. I her	eby accept th	e appointment as	registered	:
agent. I ar	m tamiliar with, and accept the oblig	gallons of, Section 667.0365, t	TOTAL CIGIGI				e appointment as	registered	
agent. I ar	m familiar with, and accept the oblig	igent and title if applicable. (NC	OTE: Registered Ag		tion's board of directors. I her		DATE		
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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), Floride Statutes indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. ify that the information or oath; that I am an