PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000037149

1. Corporation Name

BURIC GROUP, INC.

Principal Place of Business

Mailing Address

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90027 012 ***150.00



27 City & State Country Zip Country Country 28 Country Country 29 Country 29 Country 30 Country 40 Country 30 Country 30 Country 30 Country 40 Cou	Applied For Not Applicable 75 Additional		
3. Date Incorporated or Qualifed 05/08/1995 2. Principal Place of Business 21	Applied For Not Applicable 75 Additional		
2. Principal Place of Business 2. Amailing Address 2. Principal Place of Business 2. PARK ROAD 2. PARK ROAD 2. PARK ROAD 2. FEI Number 65-0585658 Suite, Apt. #, etc. 2. City & State 2. Country 3. Country 3. Name and Address of Current Registered Agent BURIC, DANIEL 4764 NW 5 ST 10. Name and Address of New Registered Agent 81. Name 82. Street Address (P. 9. Box Number is Not Asceptable)	Not Applicable 75 Additional		
21 / O Z N PARK ROA 26	Not Applicable 75 Additional		
Suite, Apt. #, etc. Suite, Apt. #, etc.	75 Additional		
27 City & State County St. This corporation owes the current year Intangible Personal Property Tax. 9. Name and Address of Current Registered Agent BURIC, DANIEL 4764 NW 5 ST Street Address (P.O. Box Number is Not Asceptable) City & State County Coun			
City & State 23 HOLLYWOOD FL 28 HOUWOOD Zip Country 24 3 3 0 2 / 25 B R OWARD 29 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e Required		
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Zip Countly Zip Countly 25 B R OWARD 29 330 2/ 30 B COWARD Personal Property Tax. Yes 9. Name and Address of Current Registered Agent BURIC, DANIEL 4764 NW 5 ST 82 Street Address (P.O. Box Number is Not Asceptable)	ded to Fees		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 81 Name 82 Street Address (P.O. Box Number is Not Asceptable)			
BURIC, DANIEL 4764 NW 5 ST 82 Street Address (P.O. Box Number is Not Asceptable)	(X)No		
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4764 NW 5 ST			
1/64 NW 5 SI	1 Other at Address (D.O. Day Mymber is Not Associable)		
	1		
PLANTATION FL 33317			
			
84 City 07/ N/ 100% FL 85 5	Zin Code		
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 OFFICE AND DESCRIPTION OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF T	67000 111 40		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TIME 1/2 Changes TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14.1 TIME 1/2 Changes TO OFFICERS AND DIRECTORS 14.1 TIME 1/2 Changes TO OFFICERS AND DIRECTORS 15.1 TIME 1/2 Changes TO OFFICERS 15.1 TIME 1/2			
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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 indicated on this angual report or supplemental angual and accurate and that my signature shall have the same legal effect as if made under path:	the information		

Trustee empowered to execute this report as required by Chapter 697, Florida Statutes; and that my name appears in an address, with all other like empowered. officer or director of the corporation or the Block 12 or Block 13 if changed, or on

NAME OF SIGNING OFFICER OR DIRECTOR