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 # **P95000047132**

1. Corporation Name

THE 747 CORPORATION

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90041 025 ***150.00



Principal Place of Business Mailing Address									
4304 MARKS W. LAKE WORTH F		4304 MARKS WAY LAKE WORTH FL 33463				DO NOT WRITE IN TH	S SPACE		
						3. Date Incorporated or Qualifed 06/13/1995			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number 65-0591193	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip				8. This corporation owes the current year Intangible			
24	25	29	30			Personal Property Tax.	Yes	□No	
	9. Name and Address of Curre					10. Name and Address of New Registered Agent			
or regule and resolves of our resolves					me				
WHITE, RUSSELL 4304 MARKS WAY				82 St	eet Addre	Idress (P.O. Box Number is Not Acceptable)			
	WORTH FL 33463			83					7
				84 Ci	•	F	┖╎ᆜ	Zip Code	
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the obligi	of Florida, Such change was	autnorize	a by the i	med corpo corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing ointment a) its registered s registered	1
SIGNATURE	• •								ļ
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re					ture required	when reinstating) DATE	AND OIDE	OTODE IN 42	ને કૃ
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	Char		; ;
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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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in nen with an address, with all other like empowered.

PRESIDENT SIGNATURE