FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLOFIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90056 036 ***158.75

DOCUMENT # P95000049398

RINDNER/SCANTLEBURY BUILDING AND DESIGN II, INC.

Principal Place of Business Mailing Address					I PARTIES HE SAIST BUILD BUILD BEIN BEN	JUN 01019 1010	JB 1901 0 3000) 3019
6489 LEGEND CLUB DRIVE 20110 BOCA VV. DR WEST PALM BCH FL 33412 BOCA RATON FL 33434					DO MOT WANTE IN I		=
					DO NOT WRITE IN 1 3. Date Incorporated or Qualife 1	HIS STACE	<u>-</u>
					06/23/1995		
N Dobbat Di	and of Division	2a. Mailing Aildress			4. FEI Number		Applied Fo
'	ace of Business	-			65-0596152	-	Not Applic
21 Suite, Apt. i	# etc	26		· 		<u>\$8.</u>	75 Addition
2.?	242	27 24	2_		5. Certificate of Status Desired		ee Required
City & State	•	City & State			6. Election Campaign Financin j		.00 May Be
23		28			Trust Fund Contribution		ided to Fees
Zip	Country	Zip	Country	1	8. This corporation owes the current year		
2.1	25		30		Personal Property Tax.	[]Yes	s 🔲 No
	9. Name and Address of Curren	t Registered Agent	81	Alessa	10. Name and Address of New Registe	red Açent	
DIME	NED MADTIN		01	Name			
	NER, MARTIN 0 BOÇA WEST DRIVE		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
BUU.	A RATON FL 33434		83				
			84	City		85	Zip Code
	·			L	Li de de la composición del composición de la co		na ite regista
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was aut	thorized by	the corporat	portition submits this statement for the purposition's board of directors. I hereby accept the a	ppointment	as registered
SIGNATURE							
	Signature, typ ad or printed name of egistered agen			nt signature requir	red when reinstating) DAT ADDITIONS/CHANGES TO ()FFICER		ECTORS IN
12.		ID DIRECTORS	13.		AUDITIONS/CHANGES TO OFFICER	Ch	
TMLE	PD MARTIN	C3 pereis				,	
VAME	RINDNER, MARTIN		1.2 NAME				
STREET ADDRESS	20110 BOCA WEST DRIVE		1	TADDRESS			
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NAME	RINDNER, ANITA		22 NAME				
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NAME			6.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	O. via 440 07/20/3 First Oct 1 - 1/		the inferred

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 informationdicated on this arroual 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 acdress, with all other like empowered.

SIGNATURE: _