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 # **P95000052437**1. Corporation Name

| Principal Place of Business | Mailing Address | | | |
|--|--|--|--|--|
| B136 SE PALM HAMMOCK LANE HOBE SOUND FL 33455 | 8136 SE PALM HAMMOCK LANE HOBE SOUND FL 33455 | | | |
| | | | | |
| | 2a. Mailing Address | | | |
| Suite, Apt. #, etc. | 26 Suite, Apt. #, etc. | | | |
| Suite, Apt. #, etc. | 26 | | | |
| Suite, Apt. #, etc. City & State | 26 Suite, Apt. #, etc. | | | |
| 21 Suite, Apt. #, etc. | Suite, Apt. #, etc. 27 City & State | | | |

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90248 016 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

07/03/1995 4. FEI Number

65-0609938

| 9. Name and Address of Current Registered Agent PECORARO, RALPH 8138 SE PALM HAMMOCK LANE HOBE SOUND FL 33455 46 City FL 85 Zip Code 71. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I minimaliar with, and except the obligations of, Section 0505, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I minimaliar with, and except the obligations of, Section 0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I minimaliar with, and except the obligations of, Section 0505, Florids Statutes, the above-named corporation's board of directors. I nereby accept the appointment as registered orfice or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered significant or registered agent. I minimaliar with, and except the obligation of, Section 0505, Florids Statutes. SIGNATURE 9 | Zip | Country | Zip | Country | 8. This corporation owes the current year Intangible | | |
|--|----------------|--|---------------------------------|--|--|---|------------------------|
| PECORARO, RALPH 8138 SE PALM HAMMOCK LANE HOBE SOUND FL 33455 82 83 84 City FL 85 85 87 86 87 87 88 88 89 89 89 89 89 89 | 4 | | | 30 | | | Æ No |
| PECORARO, RALPH 8138 SE PALM HAMMOCK LANE HOBE SOUND FL 33455 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 87 Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Number is Not Acceptable) 88 Zip Code 89 Zip Code 81 PL Street Address (P.O. Box Number is Not Acceptable) 89 Zip Code 81 Zip Code 92 Zip Code 94 Zip Code 95 Zip Code 95 Zip Code 95 Zip Code 96 Zip Code 97 Zip Code 96 Zip Code 97 Zip Code 97 Zip Code 97 Zip Code 96 Zip Code 97 Zip Code 96 Zip Code 97 Zip Code 98 Zip Code 99 Zip Code 99 Zip Code 90 Zip Code | | 9. Name and Address of Current F | Registered Agent | | 10. Name and Address of New | Registered Agent | |
| 11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes. the above-named corporation submits this statument for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, Type of period name of registered agent agent and the Frapicase (NOTE, Registered Agent signature required when remistance) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PECORARO, RALPH 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME PECORARO, RALPH 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PCHEW, DAVID 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. TITLE 15. TITLE 16. TITLE 17. TITLE 18. Change I Addition 18 | 8136 | SE PALM HAMMOCK LANE | | 82 Street Addre | ss (P.O. Box Number is Not Accep | table) | |
| 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 office or registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of tregistered agent and title if applicable (NOTE: Registered Agent signature required when retristating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS IN 12 NAME PECORARO, RALPH 11. TITLE PECORARO, RALPH 11. STREET ADDRESS 11. CITY: ST-2P 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. STREET ADDRESS 14. CITY: ST-2P 14. CITY: ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. ST-2P 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. STREET ADDRESS 14. CITY: ST-2P 14. CITY: ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY: ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. ST-2P 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I | HOB | E SOUND FL 33455 | | 83 | | | |
| office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. I heritary accept the deplatations of Section 607/505/F, Flonda Statutes. SIGNATURE Signature. The process of the composition of | | | | | - | FL | |
| TITLE DELETE SINGAPORE 16 TITLE SINGAPORE 16 | office or r | egistered agent, or both, in the State of | Florida. Such change was a | uthorized by the corporation | ration submits this statement for the n's board of directors. I hereby acco | e purpose of changing its ept the appointment as reg | registered gistered |
| 12. OFFICERS AND DIRECTORS TITLE PAME PECORARO, RALPH 8136 SE PALM HAMMOCK LANE HOBE SOUND FL TITLE VP CHEW, DAVID STREET ADDRESS STREET | SIGNATURE | | AMOTE Applicable | - Projectored Agent signature required | when reinstating) | DATE | |
| TITLE PECORARO, RALPH 8136 SE PALM HAMMOCK LANE HOBE SOUND FL TOURY-ST-ZIP THE VP CHEW, DAVID 21-04 PEARL TOWER 62 BAY SHORE STREET ADDRESS SINGAPORE 16 TOURL STREET ADDRESS SINGAPORE 16 TOURL STREET ADDRESS SINGAPORE 16 TOURL TOURL TOURL 62 BAYSHORE STREET ADDRESS SINGAPORE 16 TOURL TOURL 7 Change Addition | 40 | | | | | | RS IN 12 |
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SIGNATURE: