Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

## 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 # P95000053570

1. Corporation Name

25

Principal Place of Business	Mailing Address						
337 WORTH AVE PALM BEACH FL 33480	337 WORTH AVE PALM BEACH FL 33480						
Principal Place of Business 21	2a. Mailing Address 26						
<u> </u>	Suite, Apt. #, etc.						
Suite, Apt. #, etc.	<u> </u>						
Suite, Apt. #, etc.  22  City & State  23	27 City & State						

29

9. Name and Address of Current Registered Agent

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90013 044 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

.07/12/1995 4. FEI Number

65-0783783

Signelure, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE				81	Name							
2139 UNIVERSITY DRIVE., #385  CORAL SPRINGS FL 33071  83  84 City	2139 UNIVERSITY DRIVE., #385			92 Street Address (P.O. Box Number is Not Acceptable)								
B4   City   FL   B5   Zip Code				02	OZ SIJECT MULICOS (F.O. DOX MULITURI IS MUL MCCEPTADIE)							
III. 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 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 algorature required when reinstating)   DATE				83								
III. 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 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 algorature required when reinstating)   DATE										Joe 7:- C		
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board or directors. Thereby accept the appointment as registered agent and faller with, and accept the obligations of, Section 607.0505, Florida Statutes agent. The agent are faller with, and accept the obligations of, Section 607.0505, Florida Statutes agent. The agent are faller with an elevation of registered agent and title if applicable (NOTE: Registered Agent algorature required when reinstatting)  DATE  (NOTE: Registered Agent algorature required when reinstatting)  DATE  12. ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  PES 102 FAV Grange Addition  DRUMMOND, ANGIE  12. NAME  13. STREET ADDRESS  14. CITY-ST-ZIP  DELETE  14. CITY-ST-ZIP  TILE  AMME  12. NAME  13. STREET ADDRESS  14. CITY-ST-ZIP  DELETE  13. TITLE  14. CITY-ST-ZIP  TITLE  AMME  32. NAME  33. STREET ADDRESS  34. CITY-ST-ZIP  Change Addition  Addition  AMME  35. ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  Grange Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  DELETE  13. TITLE  13. TITLE  14. CITY-ST-ZIP  Change Addition  ADDITIONS/CHANGES AND DIPÉCTORS IN 12  DELETE  13. TITLE  14. CITY-ST-ZIP  Change Addition  ADDITIONS/CHANGES AND DIPÉCTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  DELETE  13. TITLE  14. CITY-ST-ZIP  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  DELETE  13. TITLE  14. CITY-ST-ZIP  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  DELETE ADDRESS  34. CITY-ST-ZIP  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIPÉCTORS IN 12  DELETE ADDRESS  35. CITY-ST-ZIP  Change  Addition  ADDRESS TO OFFICERS AND DIPÉCTORS IN 12  DELETE ADDRESS TO OFFICERS AND DIPÉCTORS IN 12  DELETE ADDRESS TO OFFICERS AND DIPÉCTORS IN 12  ADDRESS TO OFFICERS AND DIPÉCTORS IN 12  DELETE ADDRESS TO OFFICERS AND DIPÉCTORS IN 12  DELETE ADDRESS TO OFFICER				84	City				FL	.   B5   Zip C	oue	
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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	14 I hereby o	certify that the information supplied with this filing does not qui	alify for the ex	emption	on stated	in Section 119.0	7(3)(i), Florid	a Statute	s. I further ce	rtify that the in	formation	

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 applicated to the statutes of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name applicate the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to execute this report as required by Chapter 607, Florida Statutes; and that my name application is considered to execute this report as required to execute the considered to execute the consider