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 # P9500063870

Corporation Name

04-20-1999 90142 006 ***150.00

FILED Apr 20, 1999 8:00 am Secretary of State

LUNDEE	IN PROPERTIES, INC.						
Principal Plac	e of Business	Mailing Address			I ISBILISAL LIN IBYDI DUEL NEVIL ANIEL NEVIL AL	iti d m il om izidi susii	16811 9811 1881
1621 N DIXIE I	-twy	1621 N DIXIE HWY					
POMPANO BEACH FL 33060 POMPANO BEACH FL 33060					DO NOT WRITE IN TI	JIG GDACE	
}					3. Date Incorporated or Qualifed	113 51 ACL	· <u>-</u>
					,		
2. Principal Place of Business 2a. Mailing Address					08/17/1995 4. FEI Number	I Ar	plied For
<u>├</u> ¬					65-0576235	<u> </u>	ot Applicable
21 26 Suite: Apt: #, etc. Suite: Apt: #, etc.					<u> </u>	\$8.75 Additional	
					5. Certifcate of Status Desired		equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23					Trust Fund Contribution		to Fees
Zip			Country		8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre	<u> </u>			10. Name and Address of New Register	ed Agent	
			81	Name			
HALL, LORRI L			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
1621 N DIXIE HWY				Ollock Madre			
PON	IPANO BEACH FL 33060		83				
			0.4	0)		. 85 Zip	Code
			84	City	F		Code
agent. I a			_		oration submits this statement for the purpose in's board of directors. I hereby accept the ap		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	HALL, LORRI L		1.2 NAME				
STREET ADDRESS			1.3 STREET A	DDRESS			
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-	ZIP			
TITLE	VD	☐ DELETË	2.1 TITLE			☐ Change	☐ Addition
NAME	LUNDEEN, GORDON B	to big the	2.2 NAME		ويعفا لينيوس فأجري والجار للووسا		م جثين د د د
STREET ADDRESS			2.3 STREET ADDRESS		•		
CITY-ST-ZIP	FT PIERCE FL 34982		2.4 CITY-ST-ZIP				
TITLE	•	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS	:		3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP			П <u>с</u> ь	☐ Addition
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Maginon
NAME	·		4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				- Addition
TITLE		☐ DELETE	5.1 TITLE				☐ Addition
NAME	1			Ì		Change	
STREET ADDRESS	ا م		5.2 NAME		<u> </u>] Change	
CITY-ST-ZIP			5.3 STREET A			Change	
TITLE			5.3 STREET A		•		□ Addition
101LE - 3''	And the second s	☐ DEL E TE	5.3 STREET A 5.4 CITY-ST- 6.1 TITLE		•	Change	Addition
NAME TO !!	man to the same	☐ DEL E TE	5.3 STREET A 5.4 CITY-ST- 6.1 TITLE 6.2 NAME	ZIP	•		Addition
7, 3, 1	FOREST	☐ DEL E TE	5.3 STREET A 5.4 CITY-ST- 6.1 TITLE	ZIP ADDRESS			Addition

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 suppliemental 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 address, with all other like empowered.

SIGNATURE

TO THE AND TYPED OB PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pul 15,99 3946851