## 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 # **P95000067692**1. Corporation Name

SOUTH FLORIDA SALES & MARKETING CORP

						BERLENNIN BILLT INDAB ALLIA	: <b>:</b> : : : : : : : : : : : : : : : : :
Principal Place	e of Business	Mailing Address					
P.O. BOX 8413 P.O. BOX 8413							
		CORAL SPRINGS FL 33075	S FL 33075		DO NOT WRITE IN THIS SPACE		
US		•			3. Date Incorporated or Qualifed		
					08/31/1995	•	
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Api	plied For
	lace of Dusiness	26			65-0608900	<u> </u>	t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 A	<del></del> {
22	n, 0.00.	27			5. Certificate of Status Desired	Fee Re	
City & State	e	City & State			6. Election Campaign Financing	\$5,00	May Be
23	-	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Count	у	8. This corporation owes the current	year Intangiole	
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	istered Agent	
			8	1 Name			
	tzer, Herbert		8	2 Street Ac	dress (P.O. Box Number is Not Acceptable	<u>-)</u>	··
3631	TURTLE RUN BLVD		ľ	Substat	desage (F.O. Box Hamber to Hots observed	*) 	
#71	7		8	3	第三人类的 100mm	<b>第1367</b> 461464	
COR	IAL SPRINGS FL 33067		- <u>-</u>	4 00	- Alexander Maria (China)	.t.d. 15 of 200 (200 disc.	1819 101 948 1646 181 174
			8	4 City		FL   S   Zip C	,oue
						man of changing its	registered
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statut	es, the abo	ve-named co	orporation submits this statement for the pu	ipose of changing its	iegiateied i
office or r	egistered agent or both in the State	of Florida, Such change was a	utnonzea b	v me comora	orporation submits this statement for the pu ation's board of directors. I hereby accept the	he appointment as rec	gistered
office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida, Such change was a	utnonzea b	v me comora	proporation submits this statement for the puation's board of directors. I hereby accept the	he appointment as rec	gistered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	utnonzed b rida Statute	y the corpora es.	proporation submits this statement for the pu ation's board of directors. I hereby accept the uired when reinstating)	he appointment as reg	gistered
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was a ations of, Section 607.0505, Flo	utnonzed b rida Statute	y the corpora es.	ation's board of directors. Thereby accept a	DATE CERS AND DIRECTO	RS IN 12
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6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 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 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.

6.2 NAME

SIGNATURE:

TITLE

NAME

☐ DELETE

**FILED** 

Feb 12, 1999 8:00am

**Secretary of State** 

02-12-1999 90001 040 \*\*\*150.00

☐ Addition

☐ Change