PROFIT. CORPORATION : ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90145 006 \*\*\*150.00

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					10/16/1995					1
2. Principal f	Place of Business	2a. Mailing Address			4. FEI Number			ΙAρ	plied For	1
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Suite, Apt		Suite, Apt. #, etc.						\$8.75	Additional	7
22		27 _4 (			5. Certificate of St.	atus Desired	<u> </u>	Fee Re	quired	1 .
City & Sta	ite	City & State			6. Election Campa			\$5.00		
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	LANDALE FL 33009		- 1	~						ł
			ε	4 City		<del></del>	E1	85 Zip C	ode	]
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office or	registered agent, or both, in the State or am familiar with, and accept the obligat	of Florida. Such change was suit	orized	A the colbo	ration's board of directors.	I hereby accept	the appoin	ment as rec	istered	Ì
agent. I a	am familiar with, and accept the obligat	tions of, Section 607.0607, Florida	a State	3.		4	12619	19		ł
SIGNATURE	SOEVEN	t ago title it applicable. (MOTE YEA			guared when reinstating)		DATE DATE			_
12.		D DIRECTORS	13.		ADDITIONS/CH/	NGES TO OFFI		DIRECTO	RS IN 12	25E034 (11/98)
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NAME:		ì	6.2 NAME	: }						

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3Xi), 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.

6.3 STREET ADDRESS

6.4 CTTY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS