## 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 # P95000084224

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90222 035 \*\*\*150.00

Principal Place of Business Malling Address 3370 N.E. 5TH AVENUE 3370 N.E. 5TH AVENUE		
	1919 11818 119	
DAME AND DAME OF BRIDE		
OAKLAND PARK FL 33334 OAKLAND PARK FL 33334	0.5	
DO NOT WRITE IN THIS SPA	<u></u>	
3. Date Incorporated or Qualifed 11/02/1995		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Appli	ied For
21 65-0689103	Not A	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.	8.75 Ad	
22 27	Fee Requ	
	5.00 м	- 1
23 Zel Trust Fund Contribution	Added to	rees
Zip Country Zip Country 8. This corporation owes the current year Intangib		∃No
24 25 30 30 30 30 30		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agen 81 Name		
ZARLOTSKY LILY		
3370 NE 5TH AVE  82 Street Address (P.O. Box Number is Not Acceptable)		
OAKLAND PARK FL 33334		
84 City FI 85	Zip Co	ode
60 000 of 000 of 000 the Charles the observation submits this statement for the purpose of chan	aina its re	egistered
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 chan 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	nging its re int as regis	egistered stered
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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 of pn an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: 3