PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000086652

1. Corporation Name

FIGOR OURS INSCREEN

Apr 13, 1999 8:00 am Secretary of State

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rino i oi	UN INVEST, INC.								
Principal Place	of Business	Mailing Address			_	i inbiladi ita inibi nilit dalil	66 111 66 111 66 184 1811 0	V III V III V	
301 NE 15TH AVENUE FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301						DO NOT WE	RITE IN THIS SPA	ACE	
ı						ate Incorporated or Qualife	d		
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			I Number		Арр	lied For
21		26				5-0620671		Not	Applicable
Suite, Apt.	•	Suite, Apt. #, etc.	1			artifcate of Status Desired		8.75 Ac	
City & State	e ·	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Added to Fees			
23	Country	Zip	Cour	itry			recent vener letangi		1000
Zip 24	Country 25	·	30		Pe	nis corporation owes the cuersonal Property Tax.		Yes [⊒No
	9. Name and Address of Curren	t Registered Agent			10. N	ame and Address of New	Registered Age	nt	
VIVIES, PATRICK CPA 721 17 STREET FORT LAUDERDALE FL 33316				82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code					
office or n agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	itnorized	ove-named	d corporation so poration's board	ubmits this statement for the difference of directors. I hereby acc	FL e purpose of charent the appointment	nging its reg	egistered istered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re				Agent signature	required when rains	tating)	DATE		
12.	ID DIRECTORS	13.		AD	DITIONS/CHANGES TO C				
TITLE	PTD DELETE 1.11		1.1 701	LE				Change	☐ Addition
NAME (1.2 NAJ	ME					}
STREET ADDRESS	701 SOUTHEAST 2ND COURT 1.		1.3 STF	REET ADDRESS	6		•]
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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, or on an attachment with an address, with all other like empowered.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

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5.4 CITY-ST-ZIP

NAME

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