PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000094288

1. Corporation Name

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90045 045 ***150.00

1								
Principal Place	of Rusiness	Mailing Address						
•	•	2383 NW 24 STREET						
2383 NW 24 STREET 2383 NW 24 STREET BOCA RATON FL 33434 BOCA RATON FL 33434								
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
-						12/11/1995		
2. Principal Place of Business		2a. Mailing Address				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ied For	
21		26				65-0650131 Not.	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			,	5. Certificate of Status Desired . L. Foo Box		
City & State		City & State						
City & State		f 1				6. Election Campaign Financing Trust Fund Contribution S.00 May Be Added to Fees		
Zip Country		Zip Country				8. This corporation owes the current year Intangible		
<u> </u>	25 Z5	29	30	,			∵]No	
24	9. Name and Address of Currer		1301			10. Name and Address of New Registered Agent		
·	5. Hallie and Address of Carro.	in regions rigen		81 N	ame			
ALLE	VA, FRANK T					(D.O. D. Markette)		
2383 NW 24 STREET				82 S	treet Add	Address (P.O. Box Number is Not Acceptable)		
BOC	A RATON FL 33434		ì	83				
1								
				84 C	ity	FL 85 Zip Co	ode	
office or re agent. I as SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obliga	ations of, Section 607.0505, Fl	autnorized orida Statu	DV III e	corporau	rporation submits this statement for the purpose of changing its nation's board of directors. I hereby accept the appointment as regi	egistered	
							I	
	Signature, typed or printed name of registered age			Agent sig	nature require	applitions/CHANCES TO DEFICERS AND DIRECTOR	25 IN 12	
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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.

SIGNATURE: