**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # POSOCOO7431

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

## Secretary of State DIVISION OF CORPORATIONS

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

03-01-1999 90115 011 \*\*\*150.00

1. Corporation DESIGNE  Principal Place 9942 MAJORCA BOCA RATON F	ER SALES OF BOCA, INC. e of Business PLACE	Mailing Address 9942 MAJORCA PLACE BOCA RATON FL 33434		DO NOT WRITE IN THI	
				3. Date Incorporated or Qualifed 12/20/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number 65-0671940	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
<b>–</b>		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23	~	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	
24	25	29		Personal Property Tax.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registerer	i Agent
FOIE	DIANI DONALD D		81 Name J	Effroy BOLTON	
FRIEDMAN, NOTALD N					1 /20-0
				OW. Malmotto PKRU ST	300
BOCA RATON FL 33432				•	
			84 City />	DA TOLL	85 Zip Code
			1 00	DEARATON F	53952
office or reagent. I as	egistered agent, or both, in the State m familiar with, and accept the oblig				pintment as registered
SIGNATORE	Signature, typed or printed name of registered age		Registered Agent signature requir		NO SIDESTODO IN 42
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS /	Change Addition
TITLE	D COT (	☐ DELETE	1.1 TITLE		
NAME	MARCUS, BERT		1.2 NAME		
STREET ADDRESS	9942 MAJORCA PLACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33434	☐ DELETE	1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		C DELEVE	2.1 ITILE 2.2 NAME		
NAME			2.3 STREET ADORESS		Į
STREET ADDRESS			2.4 CITY-ST-ZIP		
CITY-ST-ZIP		□ DELETE	3.1 TITLE		Change Addition
TITLE			3.2 NAME	• .	
NAME STREET ADDRESS			3.3 STREET ADDRESS		ļ
STREET ADDRESS			3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	<u></u>	☐ DELETE	4.1 TITLE		Change Addition
NAME		_	4. 2 NAME	_	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	<u> </u>	
TITLE		☐ DELETE	5.1 TITLE	*	☐ Change ☐ Addition
NAME			5.2 NAME	e de la companya del companya de la companya del companya de la companya del companya de la companya de la companya de la companya del companya de la companya della companya de la companya de la companya della compan	
STREET ADDRESS	1		5.3 STREET ADDRESS		and the second of the second o
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
1			6.2 NAME		

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 60 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP