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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P9600003902**1. Corporation Name

PACTOLE REDUX LIMITED FLORIDA, INC.

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Principal Place	e of Business	Mailing Address							
315 S ŁAKE DRIVE		505 S FLAGLER DRIVE				İ			
PALM BEACH FL 33480		STE 900							
		WEST PALM BEACH	I FL 33401			DO NOT WRIT	E IN THIS S	PACE	
		US				3. Date Incorporated or Qualifed			
						01/08/1996			
2. Principal Pl	lace of Business	2a. Mailing Address	S			4. FEI Number			olied For
21		26				65-0640913			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	tc.			5. Certifcate of Status Desired		\$8.75 A	
22		27				3.		Fee Re	
City & State	е	City & State			•	6. Election Campaign Financing		\$5.00	, ,
23		28				Trust Fund Contribution		Added to	Fees
Zip	Country	Zip		untry		8. This corporation owes the curre	nt year Intag	gible	
24	25	29	30			Personal Property Tax.			□No
	9. Name and Address of Curre	nt Registered Agent		- I		10. Name and Address of New Ro	egistered A	gent	
				81 1	Name	•			
HAN	LON, M T	4. 1960		82 5	Street Addre	ss (P.O. Box Number is Not Acceptal	ble)		
	ROYAL POINCIANA PLAZA	2 Nr. 171"				इ.स. १४८ मा राष्ट्रभूपाक्षकार स्टूर	<u> </u>	C & 100/2 (41)	(C.14 10 122)
PALI	M BEACH FL 33480			83		工厂工厂公司公司			
•		ί'		84	Cit.		12 E 4 (1) E 4 (1) E 4 (2)	85 Zip (Code
				104	City		FL		
• • •				1 1					
.11 Pursuant	to the provisions of Sections 607.050	02 and 607 1508, Florida	Statutes, the	above-n	named corpo	ration submits this statement for the p	purpose of cl	hanging its	registered
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	of Florida, Such change	e was authonze	ea ov mi	named corpo e corporation	ration submits this statement for the polyson's board of directors. I hereby accept	purpose of cl t the appoint	hanging its ment as re	registered gistered
office or na agent. I a	to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change	e was authonze	ea ov mi	named corpo e corporation	ration submits this statement for the parties board of directors. I hereby accept	purpose of cl t the appoint	hanging its ment as re	registered gistered
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6.3 STREET ADORESS

6.4 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 Statutas. 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 of 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 any address, with all other like empowered.

SIGNATURE:>

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 05, 1999 8:00am

Secretary of State

02-05-1999 90014 032 ***150.00