**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000015997

Principal Place of Business	Mailing Address
20 N.W. 181ST STREET MIAMI FL 3:3169	20 N.W. 181ST STREET MIAMI FL 33169

## Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90111 019 \*\*\*150.00

1. Corporation AMERICA  Principal Place	ARE TECHNOLOGIES, INC	Mailing Address									
20 N.W. 181ST STREET 20 N.W. 181ST STREET					1						
MIAMI FL 33169 MIAMI FL 33169						DO NOT WRITE IN THIS SPACE					
						3. Date In	corporated or Quali			-	
						02/19	/1996				ļ
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Nu				Applied Fo	or
21		26				65-06	72035			No Applic	cable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5, Certifca	ite of Status Desire	<b>=</b>		5 Addition: Required	ial
City & Stat	e	City & State		· · · · · · · · · · · · · · · · · · ·		6. Election	n Campaign Financi	ng 🗆	\$5.0	<b>0</b> May Be	8
23		28				Trust F	und Contribution		Adde	d to Fees	
Zip	Country	Zip	Count	try		8. This co	rporation owes the	current year			
24	25	29	30				al Property Tax.		Yes	No_	
	9. Name and Address of Curre	ent Registered Agent		<del></del>		10. Name	and Address of Ne	w Register	d Agent		
DIAN	IOELO IOCEDII D DD		8	31 Nam	e						
	IGELO, JOSEPH P DR.		8	32 Stre	et Addre	ess (P.O. Box	Number is Not Acc	eptable)			$\neg \neg$
	POINCIANA DRIVE		_	_					-		
HAL	LANDALE FL 33009		8	33							
			8	4 City					85 Zi	ip Code	
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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 signative 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 recuired 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:

CITY-ST-ZIP