FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000016308

BALSAM & CAIN ASSOCIATES, INC.

Principal Place of Business	
75 N FEDERAL HIGHWAY	

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90028 006 ***150.00



Principal Place	of Business	Mailing Address			I INTERIOR IN THE STATE OF THE		•
75 N FEDERAL DELRAY BEACH US		75 N FEDERAL HIGHWAY DELRAY BEACH FL 33483 US			DO NOT WRITE IN THI	S SPACE	
					 Date Incorporated or Qualified 02/22/1996 		
2 Principal Pt	ace of Business	2a. Mailing Address	_		4. FEI Number	Applied For	\dashv
		<u> </u>	nivio	Highw		Not Applicab	i
Suite, Apt. i	N. Dixie Highway #.etc	Suite, Apt. #, etc.	JIXIC	migna	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	-=- -
22	Raton, Fl.	28 Boca Rator	n F	<u>L</u>	Trust Fund Contribution 8. This corporation owes the current year li	Added to Fees	_
	-	<u> </u>	→	•	Personal Property Tax.	Yes No	
24 3343	9. Name and Address of Current	29 33431	30 US		10. Name and Address of New Registered	l Agent	一
	3. Name and Address of Current	togisto.ou x.gont	8	1 Name			\neg
	EMAKER, RICHARD L		8	Sho Street Add	pemaker, Richard L. dress (P.O. Box Number is Not Acceptable)		\dashv
	E. OAKLAND PARK BLVD.			4331	N. Federal Highway		_
	E-202		8	3			
FT. 	AUDERDALE FL 33306-1121		B	Suite 4 City	405	85 Zip Code	\dashv
				F+ T	auderdale Fi	- 33308	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of mailiar with, and accept the obligation	Florida, Such change was au	utnorizea b	ve-named cor	poration submits this statement for the purpose c ion's board of directors. I hereby accept the appe	f changing its registered intment as registered	d
SIGNATURE						·	
	Signature, typed or printed name of registered agent a			ent signature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 17	
12.	OFFICERS AND	DELETE	13.	 	ADDITIONS/CHANGES TO OFFICERS A	Change Addi	
TITLE	D	□ NETE1E	1.1 TITLE	. "		X 1 overigo □1.rag	
NAME	BALSAM, EILEEN B		1.2 NAMI	-	Balsam, Eileen B		1
STREET ADDRESS	2352 S. OCEAN BLVD.				431 Thatch Palm Drive		
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	- Decient	1.4 CITY		Boca Raton, FL. 33432	 ·	爿
TITLE	D	☐ DELETE	2.1 TITLE	•			-"
NAME	CAIN, SUSAN S		2.2 NAMI	1-			1
STREET ADDRESS	767 HARBOUR DR. N.E.		2.3 STRE	ET ADDRESS 1	· •		1
CITY-ST-ZIP	BOCA RATON FL 33431		2 4 CITY				ditton
- THTLE		□ DELETE	3 1 TITLE	1			110011
NAME			3.2 NAM				
STREET ADDRESS			3.3 STRE	ET ADORESS			
CITY-ST-ZIP			3.4. CITY				lition
TITLE		☐ DELETE	4.1 TITLE			Change Addi	IIIION
NAME			4. 2 NAM	€			
STREET ADDRESS			4.3 STRE	ETADDRESS			
CITY-ST-ZIP			4.4 CITY	· ST-ZIP			
*TITLE	 ::	☐ DELETE	5.1 TITLE	- 1		☐ Change ☐ Add	HUON
NAME			5.2 NAM				1
STREET ADDRESS			5.3 STRI	ET ADDRESS			
CITY-ST-ZIP		A CONTRACTOR OF THE SECOND	5.4 CITY	ST-ZIP	AND AN AT ASSESS FOR AN AN		
τπιε		「日本人」の口。DELETE	6.1 TITLE	居民主管		☐ Change ☐ Add	lition
NAME		· · · · · · · · · · · · · · · · · · ·	6.2 NAM		建产业工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂工厂		1
STREET ADDRESS			6.3 STRI	EET ADDRESS	Same and the same of the same		l
CITY-ST-ZIP	,		6.4 CITY	-ST-ZIP			

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 Chapter 6, or on an attachment with an address, with all other like empowered.

MAJURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR