

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

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90077 013 ***150.00

DOCUMENT # P96000021274

1. Corporation Name

CAPITAL FUND CONTROL CORPORATION

Principal Place of Business

1031 IVES DAIRY RD., STE. 129
MIAMI FL 33179

Mailing Address

1031 IVES DAIRY RD., STE. 129
MIAMI FL 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1996

4. FEI Number

65-0652764

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 1055 S. Federal Hwy.

Suite, Apt. #, etc.

2a. Mailing Address

26 1055 S. Federal Hwy.

Suite, Apt. #, etc.

City & State

23 Hollywood, FL

Zip

Country

24 33020

25 USA

City & State

28 Hollywood, FL

Zip

Country

29 33020

30 USA

9. Name and Address of Current Registered Agent

GORDON, KENNETH M.
1031 IVES DAIRY RD., STE. 129
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1055 S. Federal Hwy.

83

84 City

Hollywood,

FL

85 Zip Code

33020

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME GORDON, KENNETH M.
STREET ADDRESS 1031 IVES DAIRY RD., #129
CITY-ST-ZIP MIAMI FL

TITLE S ☐ DELETE

NAME GORDON, SUSAN M
STREET ADDRESS 1031 IVES DAIRY RD, SUITE 129
CITY-ST-ZIP MIAMI FL 33179

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME 1055 S. Federal Highway
13 STREET ADDRESS Hollywood, Fl. 33020
14 CITY-ST-ZIP

21 TITLE ☒ Change ☐ Addition

22 NAME 1055 S. Federal Highway
23 STREET ADDRESS Hollywood, Fl. 33020
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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 a letter like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/99

954-922-1822

Date

Daytime Phone #

CR2E034 (11/98)