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 # P96000021379

1. Corporation Name

GOLDSTEIN MACADAR, INC.

	·						1410 IA11 1881
Principal Place of Business Mailing Address							
1498 S.W. 1ST STREET BOCA RATON FL 33486		1498 S.W. 1ST STREET BOCA RATON FL 33486		DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualifed		
					03/08/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	App	olied For
21	4				65-0647204		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A	1
22	<u> </u>	27			3 .	Fee Rec	
City & State City & State		City & State	3		6. Election Campaign Financing	\$5.00	
23	28]				Trust Fund Contribution	Added to	Fees
Zip			Country		8. This corporation owes the current ye	ear Intangible ∐Yes	□No Ì
24		25 29 30			Personal Property Tax. 10. Name and Address of New Regist		
9. Name and Address of Current Registered Agent			81	Name	10. Name and Address of New Regist	BIEG Agent	
GOLI	DSTEIN, VICTORIA		Ľ				
1498 S.W. 1ST STREET			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33486			83	 			
DOOK PATON FE SOUR			03				
			84	City		FL 85 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the				o named or	orporation submits this statement for the nurpe	se of changing its	registered
 Affice or re 	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was auti	nonzea by	the corpora	ation's board of directors. I hereby accept the	appointment as reg	gistered
SIGNATURE						ATE	{
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				ut aignature redi	uired when reinstating) ADDITIONS/CHANGES TO OFFICE		RS IN 12
12.		DELETE	13.		ADDITIONO/GILANGES TO GIT TOE	☐ Change	Addition
TITLE	OU DOTTON MOTODIA	_ beer.u	1.2 NAME				_
NAME	doctorum, violotim		1	TADDRESS			l
STREET ADDRESS	BOOK BATON FI		1.4 CITY-5				
CITY-ST-ZIP	BUCA RATUN FL	☐ DELETE	2.1 TITLE	51-ZIP		Change	☐ Addition
TITLE			2.2 NAME				
NAME				T ADDRESS			-
STREET ADORESS			2.4 CITY-		± · ·		
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	3(+21		☐ Change	Addition
NAME		_	3.2 NAME	ļ			
1				TADDRESS			
STREET ADDRESS			3.4. CITY-				
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	31-21		☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE	·	☐ DELETE	5.1 TITLE				Addition

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 changed, oy on an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

Change

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90125 024 ***150.00

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Addition