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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000022911

1. Corporation Name

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90128 016 ***150.00

Principal Place	VE 3330 SW 13-AVE			
FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315			DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualifed	
			03/11/1996	
	tace of Business 2a. Mailing Address	4.0	4. FEI Number	Applied For
21 345	4 NW 21 AVE 26 3454 NW27	Ave	65-0649994	Not Applicable
Suite, Apt.	├		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	ie / A Aty & State / /	1.	6, Election Campaign Financing	\$5.00 May Be
W W	pano Beach, N-28 Voumpano Beh,	1/L.	Trust Fund Contribution	Added to Fees
Zip カカロ	Country 25 Draward 29 37069 30	Country Noward	8. This corporation owes the current year Int	tangible ☐ Yes No
24 770	9. Name and Address of Current Registered Agent	17100000	Personal Property Tax. 10. Name and Address of New Registered	
	5. Haine and Address of Content Registered Agent	81 Name	10, Maine and Address of New Registered	Agent
VALL	.e, rose d			
3454	NW 27TH AVE	82 Street A	ddress (P.O. Box Number is Not Acceptable)	
POM	IPANO BCH FL 33069	83		
		84 City		85 Zip Code
		- -	FL	.
11, Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the	he above-named o	orporation submits this statement for the purpose of	changing its registered
office or re	egistered agent, or both, in the State of Florida. Such change was autho m familiar with, and accept the obligations of, Section 607.0505, Florida	rized by the corpor Statutes.	ation's board of directors. I hereby accept the appoi	changing its registered ntment as registered
office or re agent. I a	egistered agent, or both, in the State of Florida. Such change was authom familiar with, and accept the obligations of, Section 607.0505, Florida Signature, typed or printed name of registered agent and title if applicable (NOTE: Regi	rized by the corpor Statutes.	ation's board of directors. I hereby accept the appoi	ntment as registered
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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 co-position 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 all other like empowered.

SIGNATURE

Daytime Phone #