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

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



DOCUMENT # P96000024459

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

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

04-27-1999 90068 034 ***150.00

REDRUN	/ SCREEN PRINTING, IN	IC.							
Principal Place of Business Mailing Address									•
232 N.E. 33RD STREET 232 N.E. 33RD STREET FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334									
							DO NOT WRITE IN TH	S SPACE	
						3.	Date Incorporated or Qualifed 03/19/1996		
2. Principal F	Place of Business	2a. Mailing Addres	s			4.	FEI Number	Ap	pied For
21		26	26				65-0652916	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	Suite, Apt. #, etc.				Certificate of Status Desired	\$8.75 A	
22		27				5.	Certificate of Status Desired	Fee Re	quired
City & S'at	te	City & State				6.	Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution	Added t	
Zip	Country	Zip	Co	ountry	/	8.	This corporation owes the current year	Intangible	
24	25	29	30				Personal Property Tax.	Yes	[]No
	9. Name and Address of Cu	rrent Registered Agent				10	Name and Address of New Register	d Agent	
- "				81	Name				
LIEBERBAUM, JONATHAN					Street A	ddraee (f	P.O. Box Number is Not Acceptable)		
232 N.E. Z3RD STREET					Silection	10 21 633 (1	.o. Box (validation is the videoplatic)		
ft. laudirdile fl 33334					83				
	- /\ /							11 2	<u> </u>
	11 1			84	City		F	85 Zip C	oae
11. Pursuant office or a agent. La	to the profisions of Sections 607 registered agent or both, in the S im familian with, and accept the of	.0502 and 607.1508, Florida State of Florida. Such change bligations of, Section 607.05 ad agent and title if applicable.	Statu es, the was authoriz 05, Florida Sta			qu red when		X417	<u>) </u>
12.	OFFICER	S ANE DIRECTORS	1;	3.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	PTD	☐ DEL	ETE 1.1	1.1 TITLE				Change	Addition
NAME	LIEBERBAUM, JONATHAN 12		NAME	AME					
STREET ADDRESS	EET ADDRESS 232 N.E. 33RD ST.		1.3 STREET ADDRESS		TADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 3333	4	1.4	CITY-9	ST-ZIP				
TITLE		☐ DEL	ETE 2.1	TITLE				Change	☐ Addition
NAME			2.2	NAME					
STREET ADDRESS			2.3	STREE	TADDRESS				}
CITY-ST-ZIP	:		2 4	CITY-	ST-ZIP				
TITLE	DELETE 31		31 TITLE				Change	Addition	
NAME			3.2	NAME					
STREET ADDRESS					T ADDRESS				
ł				. CITY-:					
CITY-ST-ZIP		D£L		TITLE	5 r - ZJI			☐ Change	☐ Addition
ĺ				NAME					
NAME					T ADDRESS				
STREET ADDRE 3S				CITY-S					

to n 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 the 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 a found it has been provided by Chapter 607. Florida Statutes; and that my name appears in each or on an attachment with an address, with all other like empowered. I hereb / certify that the inform indicated on this annual report officer or director of the cortion Block 12 or Block 13 if charges

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

Change

Change

Addition

Addition