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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90290 012 \*\*\*150.00

## DOCUMENT # **P96000024809**1. Corporation Name

RODEO DRIVE OF HOLLYWOOD SOUTH, INC.

		<u> </u>													
Principal Place	e of Business	Mailing	Address					11							
3350 GRIFFIN R	RD	3350 GR	IFFIN RD												
FORT LAUDERDALE FL 33312			FORT LAUDERDALE FL 33312					DO NOT WRITE IN THIS SPACE							
US		US	US				-	3. Date Incorporated or Qualifed							
							3.		)/1996	a Or Qualii	eu				1
2 Principal D	lace of Business	2a Mail	ling Address					FEI Nu						Apr	lied For
<b>⊢</b> .	lace of business	<u> </u>	ing Address				-		62457				-	<del></del>	Applicable
Suite, Apt.	# ptg		Suite, Apt. #, etc.					00 00	<u> </u>				\$8.7	_	Iditional
22	#, Btc.	27	o, r.pt. 11, 010.				5.	Certifc	ate of Stati	us Desired	i [	}		e Req	,
City & State	e		City & State				6.	Electio	n Campaig	n Financi	ng "		\$5.	00 1	fay Be
23		28							und Contr		.a [	J	Add	ded to	Fees
Zip	Cour try	Zip		Co	ountry		8.	This co	rporation (	owes the	current	year nta	ingible		
24	25	29		30				Persor	al Propert	y Tax.			☐ Yes	I	□No
	9. Name and Address of C		Agent				10.	Name	and Addr	ess of Ne	w Regi	stered A	Agent		
					81	Name									
	RBACH, IRMA				82	Street A	Aridress /F	O Box	Number i	s Not Acce	entable)				
	Griffin RD				"	Ollocti	Kidicoo (i	.0.00	rianio.		-  /	·			
FOR	T LAUDERDALE FL 33312				83										
					84	City							85	Zip C	ahr
						City						FL		•	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.15	08, Florida Stat	tes, the	above	-named o	cc rooratio	n submi	s this state	ement for	the purp	oose of	changin	g its i	egistered stored
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6.4 CITY-ST-ZIP 14. I heret y 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 suppliemental 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 attactment with an address, with all other like empowered.

SIGNATURE: