PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

Principal Place of Business
8943 INDIAN RIVER RUN
DAVITAN DEACH EL SOJOY

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90186 001 ***150.00

TIMER U	MEN # P96000 INLIMITED INC.						a lki au ki a a	H a (K a kk a (ak a 14	H a rana (a haran
Principal Place	e of Business	Mailing Addres					AIG BAGI AU	ing traff gloss to	iini (inn) inii inn)
•		8943 INDIAN RI							
943 Indian River Run Boynton Beach Fl 33437 Boynton Beach Fl 33437						1			
						DO NOT WR		IS SPACE	
						3. Date Incorporated or Qualifect	ı		
						03/20/1996 4. FEI Number			Applied For
2. Principal P	Place of Business	2a. Mailing Add	tress			65-0754468		⊢ -∔-	Not Applicable
0.4.	# -1-	26 Suite, Apt.	# oto			05-07-54400			5 Additional
Suite, Apt.	#, etc.	27	m, etc.			5. Certifcate of Status Desired	\Box		Required
City & Stat		City & Stat				6. Election Campaign Financing		\$5.0	0 May Be
ר י		28	-			Trust Fund Contribution	□.		d to Fees
Zip	Country	Zip		Country		8. This corporation owes the cui	rent year	Intangible	
તે	25)	29	30	o]		Personal Property Tax.		Yes	□No
<u></u>	9. Name and Address of Currer					10. Name and Address of New	Registere	d Agent	
				81	Name				
	GUST, ANDREW			82	Street Add	ress (P.O. Box Number is Not Accept	table)		
8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437					<u> </u>	653 (F.O. DOX RUINDO IS NOT ABBOTISM			
					1				
				84	City			, 85 Z	ip Code
					(,		F	L } _	·
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such cha ations of, Section 601	inge was autr 7.0505, Florida	a Statutes	the corporat	poration submits this statement for the ion's board of directors. I hereby accessed when reinstating?	e purpose ept the app	or changing pointment as	its registered registered
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligation Signature, typed or printed name of registered age OFFICERS AN	of Florida, Such cha ations of, Section 607 ant and title if applicable.	(NOTE: Re	a Statutes egistered Ager	the corporat	ion's board of directors. Thereby acce	DATE	AND DIREC	TORS IN 12
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligation of signature, typed or printed name of registered age OFFICERS AN	of Florida, Such cha ations of, Section 607 ant and title if applicable.	inge was autr 7.0505, Florida	a Statutes a Statutes agistered Ager 13.	the corporat	ed when reinstating)	DATE	JOHNSHOW GS	TORS IN 12
office or ragent. I a SIGNATURE 12. III.E	registered agent, or both, in the State am familiar with, and accept the obligation of signature, typed or printed name of registered age OFFICERS AN PSTM AUGUST, ANDREW	of Florida, Such cha ations of, Section 607 ant and title if applicable.	(NOTE: Re	a Statutes gistered Ager 13. 1.1 TITLE	nt signature requir	ed when reinstating)	DATE	AND DIREC	TORS IN 12
office or ragent. I a SIGNATURE 12. ITLE AME TREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of registered age OFFICERS AN PSTM AUGUST, ANDREW 8943 INDIAN RIVER RUN	of Florida, Such cha ations of, Section 607 ant and title if applicable.	(NOTE: Re	a Statutes 13. 1.1 TITLE 1.2 NAME 1.3 STREE	nt signature requir	ed when reinstating)	DATE	AND DIREC	TORS IN 12
office or ragent. I a SIGNATURE 2. TILE AME TREET ADDRESS ITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of superinted rame of registered age OFFICERS AND AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437	of Flonda, Such cha attions of, Section 607 ant and title if applicable.	(NOTE: Re	a Statutes 13. 1.1 TITLE 1.2 NAME 1.3 STREE	nt signature requir	ed when reinstating)	DATE	AND DIREC	TORS IN 12
office or ragent. I a gent. I a gent	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of FICERS AND AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437	of Flonda, Such cha attions of, Section 607 ant and title if applicable.	(NOTE: Re	a Statutes 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	nt signature requir	ed when reinstating)	DATE	AND DIREC	TORS IN 12
office or ragent. 1 as agent.	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and of familiar with a comparison of familiar with, and accept the obligation of familiar with a comparison of familiar with a c	of Flonda, Such cha attions of, Section 607 ant and title if applicable.	(NOTE: Re	a Statutes ogistered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	the corporation of the corporati	ed when reinstating)	DATE	AND DIREC	TORS IN 12
office or ragent. 1 as signature 2. The ame treet address iny-st-zip inle ame treet address inty-st-zip inle	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with a superior of familiar with, and accept the obligation of familiar with a superior of fam	of Flonda, Such cha attions of, Section 607 ant and title if applicable.	(NOTE: Re	onized by a Statutes 13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 22 NAME 23 STREE	the corporation of the corporati	ed when reinstating)	DATE	AND DIREC	TORS IN 12 pe
office or ragent. I a agent. I a agent. I a siGNATURE 2. TILE AME TREET ADDRESS ITY-ST-ZIP TILE TREET ADDRESS ITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and of familiar with a comparison of familiar with, and accept the obligation of familiar with a comparison of familiar with a c	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	(NOTE: Re	a Statutes ogistered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	the corporation of the corporati	ed when reinstating)	DATE	AND DIREC	TORS IN 12 pe
office or ragent. I a agent. I a agent. I a signature 2. The same treet adoress arry-st-zip in ame ame arrest adoress arry-st-zip in ame arrest adoress arry-st-zip in a signature arrest adoress arrangement arrest adoress arrangement arrang	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with a superior of familiar with, and accept the obligation of familiar with a superior of fam	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	nge was autr 7,0505, Florid (NOTE: Re DELETE	orized by a Statutes 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 2.4 CITY-S	the corporation of the corporati	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 pe Addition pe Addition
office or ragent. I a signature 2. The ame Treet address Try-st-zip The ame Treet address Try-st-zip The ame Treet address Try-st-zip The ame	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and of familiar with, and of familiar with a state of familiar with, and accept the obligation of familiar with a state of famil	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	nge was autr 7,0505, Florid (NOTE: Re DELETE	orized by a Statutes 13. 1.1 TITLE 12 NAME 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	the corporation of the corporati	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 pe Addition pe Addition
office or ragent. I a signature 2. The ame Treet address Try-st-zip The ame Treet address Try-st-zip The ame Treet address Try-st-zip The ame	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and of familiar with, and of familiar with a state of familiar with, and accept the obligation of familiar with a state of famil	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	nge was autr 7,0505, Florid (NOTE: Re DELETE	orized by a Statutes 13. 1.1 TITLE 12 NAME 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS ST-ZIP T ADDRESS T ADDRESS	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition
office or ragent. I a signature 2. The ame Treet address Thy-st-zip The ame Treet address Thy-st-zip The ame The ame The address Thy-st-zip The ame	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and of familiar with, and of familiar with a state of familiar with, and accept the obligation of familiar with a state of famil	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	nge was autr 7,0505, Florid (NOTE: Re DELETE	orized by a Statutes as spiritered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS ST-ZIP T ADDRESS T ADDRESS	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition
office or ragent. I a signature 2. The ame Treet address Thy-st-zip The ame Treet address Thy-st-zip The ame The ame The address Thy-st-zip The ame	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and of familiar with, and of familiar with a state of familiar with, and accept the obligation of familiar with a state of famil	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	onized by a Statutes on Statut	T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition
office or ragent. I a signature 2. The AME TREET ADDRESS TITY-ST-ZIP THE TREET ADDRESS TTY-ST-ZIP THE TREET ADDRESS TTY-ST-ZIP THE AME TREET ADDRESS TTY-ST-ZIP THE AME	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of files. Signature, typed or printed name of registered age OFFICERS AN AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437 C AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437	of Flonda, Such cha attions of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition
office or ragent. I a agent. I a agent. I a signature 2. The ame treet address the street address street address street address street address	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of files. Signature, typed or printed name of registered age OFFICERS AN AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437 C AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437	of Flonda, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	opistered Ager 13. 1.1 TITLE 12 NAME 1.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 4.4 CITY-S 4.4 CITY-S 4.4 CITY-S 4.4 CITY-S 4.5 STREE 4.4 CITY-S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition Je Addition Je Addition
office or in agent. I a agent. I a self-ture. 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME STY-ST-ZIP ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of files. Signature, typed or printed name of registered age OFFICERS AN AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437 C AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437	of Flonda, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 4.5 TITLE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition Je Addition Je Addition
office or in agent. I a agent. I a self-ture. 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME STY-ST-ZIP ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of files. Signature, typed or printed name of registered age OFFICERS AN AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437 C AUGUST, ANDREW 8943 INDIAN RIVER RUN BOYNTON BEACH FL 33437	of Flonda, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition Je Addition Je Addition
office or ragent. I a agent. I a agent. I a signature 2. The ame treet address ity-st-zip itle ame treet address ity-st-zip itle ame st-zip itle address st-z	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with a comparison of familiar with, and accept the obligation of familiar with a comparison of familiar	of Flonda, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE	T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Addition Je Addition Addition Addition
office or ragent. I a agent. I a agent. I a signature 2. TLE AME TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TTLE AME TREET ADDRESS ST-ZIP TLE AME	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with a comparison of familiar with, and accept the obligation of familiar with a comparison of familiar	of Florida, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.4 CITY-S 5.4 CITY-S 5.4 CITY-S 5.5 STREE 5.5	T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Je Addition Je Addition Ge Addition
office or in agent. I a segment. I a segment. I a segment. I a segment adoress ity-st-zip it e adoress ity-st-zip it. E address st-zip it. Address st-zip it address st-zip it address st-zip it address st-zip it address	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with a comparison of familiar with, and accept the obligation of familiar with a comparison of familiar	of Florida, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 4.3 STREE 4.5 TITLE 5.5 NAME 5.5 STREE 5.6 TITLE 5.6 TITLE 5.7 TITLE 5.7 NAME 5.8 STREE 5.6 TITLE 5.7 TITLE 5.7 NAME 5.8 STREE 5.8 TITLE 5.9 NAME 5.8 STREE 5.9 NAME 5.9 STREE 5.9 STRE	T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Je Addition Je Addition Ge Addition
office or ragent. I a signature 2. The ame treet adoress ity-st-zip itle ame treet adoress ity-st-zip itle ame st-zip itle am	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of the state age of the obligation of the state age of the state	of Florida, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 5.1 TITLE 5.2 NAME 5.3 TREE 5.1 TITLE 5.2 NAME 5.3 TREE 5.4 CITY-S 6.1 TITLE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Je Addition Je Addition Ge Addition Ge Addition
office or in agent. I a segment. I a segment. I a segment. I a segment adoress ity-st-zip it e adoress ity-st-zip it. E address st-zip it. Address st-zip it address st-zip it address st-zip it address st-zip it address	registered agent, or both, in the State am familiar with, and accept the obligation of familiar with, and accept the obligation of the state age of the obligation of the state age of the state	of Florida, Such chations of, Section 607 int and title if applicable. ND DIRECTORS	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 5.1 TITLE 5.2 NAME 5.3 TREE 5.1 TITLE 5.2 NAME 5.3 TREE 5.4 CITY-S 6.1 TITLE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS T ADDRESS T ADDRESS ST-ZIP	ed when reinstating)	DATE	AND DIREC Chang	TORS IN 12 Je Addition Je Addition Je Addition Ge Addition Ge Addition

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 cath; 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 chapter or on an attachment with an address, with all other like empowered.

でNATURE: