PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000027933

Corporation Name

	511 ENT	EHPHISES:	, INC.												
Principal Place of Business Mailing Address															
511 NE 3RD AVE 511 NE 3RD AVE															
FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301									l	DO NOT WRITE IN	THIC	CDACE	:		
					•					-	Date Incorporated or Qualifed	11113	OF ACE		
											03/25/1996				
2. Principal Place of Business				2a.	2a. Mailing Address					4.	FEI Number			App	lied For
21				26	26						65-06594 <u>13</u>			Not	Applicable
Suite, Apt. #, etc.			<u> </u>	Suite, Apt. #, etc.							==5.=Certificate of Status Desired				ditional
22				27	27						- Certificate of Otelas Besiles	Fee Require			uired
23	City & State				City & State					6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees		
20	Zip						Cou	ntry		8.	8. This corporation owes the current year Intangible				
24	•	25 29 30					30				Personal Property Tax. ☐ Yes ☐ No				
	9. Name and Address of Current Registered Agent									10.	Name and Address of New Regis	tered /	Agent		
ASLANIAN, GEORGE H JR 511 NE 3RD AVE FT LAUDERDALE FL 33301							81 82 83	Name Street Add	ress (P.O. Box Number is Not Acceptable)						
} 								84	City			FL	85	Zip C	ode
11	office or n	anietorod anor	ns of Sections 607.050 at, or both, in the State , and accept the obliga	of Hone	da Such ch	ange was aut	inonzed	יעםו	tne corporati	oration on's bo	n submits this statement for the purposed of directors. I hereby accept the	ose of o appoin	changir itment	ng its r as regi	egistered istered
SI	GNATURE											ATE			
<u> </u>		Signature, typed or	printed name of registered age			(NOTE: F	<u> </u>	Agen	nt signature require	_	ADDITIONS/CHANGES TO OFFICE		D DIRE	CTOR	2S IN 12
12		OFFICERS AND DIRECTORS 13.						n F			ADDITIONS/CHANGES TO OFFICE	NO AIN	☐ Cha		Addition
TIT		ASLANIAN, GEORGE H JR										·	_		
NAI	E44 NE ODD AND								7.4000000						
ET LAUDEDDALE EL 20204							STREET ADDRESS CITY-ST-ZIP			•					
-	E pereze							ZIP			☐ Chi	ange	Addition		
ТΙΤ							πte								
NA	NIL.						2.2 NAME								
STE	The state of the s							STREET ADDRESS			· · · · · · · · · · · · · · · · · · ·				
	ry-st-zip					DELETE	2.4 CI		IT-ZIP				Cha	ande	Addition
TIT	JE					DELETE	3.1 111		1		•			ago	
NA	ME .						3.2 NA								
ST	REET ADDRESS						3.3 ST	REET	T ADDRESS		•				

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, or or an attachment with an address, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

TUBE AND TYPE OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

DELETE

3/17/55

954-719-3611

☐ Change

☐ Change

Change

☐ Addition

☐ Addition

☐ Addition

Daytime Phone #

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90081 031 ***150.00

CR2F034 (11/98)