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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000038179**

TROPIC COAST BUILDING & DESIGN, INC.

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Principal Place	e of Business	Mailing Address			* IND\$1001 (IB 19110 BESIL ANIES ONIS) NOTE ONIO	a litan inini sinii (i	1819 1811 1891
1849 NORTH UI	NIVERSITY DRIVE	1849 NORTH UNIVERSITY DI	RIVE			DO NOT WRITE IN THIS SPACE Date Incorporated or Qualifed 15/02/1996 El Number Applied For	
CORAL SPRING	S FL 33071	1849 NORTH UNIVERSITY DRIVE CORAL SPRINGS FL 33071		DO NOT WRITE IN THIS	CDACE		
						SPACE	
					1 **		Į
a Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21	nace of Eddiness	26			65-0678786	 	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 A	dditional
22		27			5. Certifcate of Status Desired	Fee Rec	quired
City & State		City & State		6. Election Campaign Financing	\$5.00		
23		28		Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes the current year in		
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Curren	t Registered Agent		11 Name	10. Name and Address of New Registered	Agent	
SCHI	ULTZ, JOEL S		Ľ				
	NORTH UNIVERSITY DR.		1	Street A	ddress (P.O. Box Number is Not Acceptable)		~
	AL SPRINGS FL 33071		1	13			
•							
	:		1	4 City	FL	85 Zip C	ode
44 Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statute	s, the abo	ve-named co	ornoration submits this statement for the purpose of	f changing its	registered
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized i	by the corpora	orporation submits this statement for the purpose o ation's board of directors. I hereby accept the appo	f changing its sintment as reg	registered jistered
office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au tions of, Section 607.0505, Flori	thorized i da Statut	es.	orporation submits this statement for the purpose o ation's board of directors. I hereby accept the appo	f changing its a pintment as reg	registered jistered
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CITY-ST-ZIP 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 orwan attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90077 034 ***150.00