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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000042569**1. Corporation Name

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90043 042 ***150.00

FUTURA	SYSTEMS, INC.								
Principal Plac	e of Business	Mailing Address				8181 88 111 88 4111 (BRECE FINES BE	110 M1140 \$0\$1 1001	
101 SW 15 ROAD 101 SW 15 ROAD					•				
MIAMI FL 33129 MIAMI FL 33129					DO NOT WO	TE IN THE	CDACE		
	•				DO NOT WR 3. Date Incorporated or Qualifed		SPACE		
					05/13/1996	•	٠.	•	
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number			Applied For	
2. FUNCIPALE		26			65-0664909			Not Applicable	1.
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Additional	į,
22		27			5. Certificate of Status Desired		Fee	Required	
		City & State	& State		6. Election Campaign Financing		\$5.0	O May Be	
23		28			Trust Fund Contribution		Adde	d to Fees	
Zíp	Country	Zip		intry	8. This corporation owes the cur	rent year Int		57 00 , .	
24	25	29	30	· · · · · · · · · · · · · · · · · · ·	Personal Property Tax.	D latanad	☐ Yes	≱ No	
	9. Name and Address of Cu			81 Name	10. Name and Address of New	Registered	Agent		
FRA	NCK, JORGE	ನ್ ಕೆ ಎ ೨೩ - <i>ಕ</i> ಕ್ರಿಸ್ -		Di Ivanie					
	SW 15 ROAD	· ·		82 Street Add	dress (P.O. Box Number is Not Accept	table)			
	MI FL 33129	,		83		<u>. a ser en antales.</u> Notación de la companyo	Auto Control	2. 新落田撰	
		'				1. J	HR. B.	31.04.13	
		•		84 City	4.2.4.	FI	^ 85 Zi	p Code	
ويعرفوه وأوردية يريي	and a second second								
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida Sta	tutes, the a	bove-named cor	poration submits this statement for the	purpose of	changing	its registered	
11. Pursuant office or r	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the of	.0502 and 607.1508, Florida Sta tate of Florida. Such change was bligations of, Section 607.0505, I	tutes, the a s authorized Florida Stat	bove-named corp by the corporati utes.	poration submits this statement for the ion's board of directors. I hereby acce	purpose of pt the appoi	changing ntment as	its registered registered	
	,	.0502 and 607.1508, Florida Sta tate of Florida, Such change was bligations of, Section 607.0505, I	tutes, the a s authorized Florida Stat	bove-named corp by the corporati utes.	poration submits this statement for the ion's board of directors. I hereby acce		changing ntment as	its registered registered	
11. Pursuant office or r agent. I a SIGNATURE	Signature, typed or printed name of registered	d agent and title if applicable. (NO	OTE: Registered	Agent signature require	red when reinstating)	DATE			(00
SIGNATURE	Signature, typed or printed name of registered OFFICERS	d agent and title if applicable. (NOS AND DIRECTORS	DTE: Registered	Agent signature require		DATE	ID DIREC	TORS IN 12	14(00)
SIGNATURE 12. TITLE	Signature, typed or printed name of registeres OFFICERS	d agent and title if applicable. (NO	TE: Registered	Agent signature require . TLE	red when reinstating)	DATE		TORS IN 12	4 (44 (00)
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registeres OFFICERS PDT FRANCK, JORGE	d agent and title if applicable. (NOS AND DIRECTORS	13. 1.1 TI 1.2 N	Agent signature require TLE	red when reinstating)	DATE	ID DIREC	TORS IN 12	0034 (44 (00)
12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registeres OFFICERS PDT FRANCK, JORGE 101 SW 15 ROAD	d agent and title if applicable. (NOS AND DIRECTORS	13. 1.1 TI 1.2 N/ 1.3 S ³	TLE AME TREET ADDRESS	red when reinstating)	DATE	ID DIREC	TORS IN 12	000004 (44/00)
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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 angular 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 attachment with an address, with all other like empowered.

SIGNATURE: