Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90249 019 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000043457

1. Corporation Name

ALLIDADE ACCORDADI E MOLICINIO CORPODATIONI VAL

Principal Place	e of Business	Mailing Address								
			CH LAKES BLVD							
SUITE 1002 WEST PALM BEACH FL 33401		SUITE 1002 WEST PALM BEACH FL 33401			DO NOT WRITE IN THIS SPACE					
WEST PALM DE	EACH PE 33401	WEST FALM DENOTITE S	0401			3. Date Incorporated or Qualifed				
						05/20/1996			-	
2. Principal Place of Business 2a. Mailing Address						4, FEI Number		Арр	lied For	
26						65-0850482		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		<b>\$8.75</b> Ad Fee Req	I	
City & Stat	te .	City & State				6. Election Campaign Financing		\$5.00 A	lay Be	
23		28				Trust Fund Contribution	ليا	Added to		
Zip	Country	Zip	Cour	ntry		8. This corporation owes the cur	rent year In		_	
24	25 29 30					Personal Property Tax. Yes No				
	<ol><li>Name and Address of Current</li></ol>	t Registered Agent		1		10. Name and Address of New	Registered	Agent		
COD	EV JOHN D			81	Name					
ERBEY, JOHN R				82	Street Addre	ress (P.O. Box Number is Not Acceptable)				
1675 PALM BEACH LAKES BLVD SUITE 1002										
WEST PALM BEACH FL 33401				83						
WES	OF PALIN DEACH PL 35401			84	City		Fl	85 Zip C	ode	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations of the state	of Florida. Such change was tions of, Section 607.0505, Fl	authorized orida Statu	by tites.	ine corporatior	n's board of directors. Thereby acce	pt the appo	intment as reg	egistared istered	
12.		ID DIRECTORS	13.	, ago. it	og oto o roquira	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR	RS IN 12	
TITLE	D	☐ DELETE	1.1 TIT	LE				Change	Addition	
NAME	ERBEY, WILLIAM C			ME						
STREET ADDRESS 1675 PALM BEACH LAKES BLVD, SUITE 1002			1.3 ST	1.3 STREET ADDRESS		•			]	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	-,	1.4 CIT		-					
TITLE	D	XX DELETE	2.1 TIT					Change	☐ Addition	
NAME	WISH, BARRY N		2.2 NA	ME					Ì	
1				REET.	ADDRESS				Í	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	,	2. 4 CI						}	
TITLE	SECRETARY	DELETE	3.1 TIT					Change	Addition	
NAME	JOHN R. ERBEY		3.2 NA	ME				•		
STREET ADDRESS	11/75 DATA DELOTE TAR	ES BLVD.	3.3 ST	REET.	ADDRESS				}	
CITY-ST-ZIP	WEST PALM BEACH, FL		3.4. Ci	TY-ST	T-ZIP					
TITLE	VICE PRESIDENT	☐ DELETE	4.1 TIT					Change	☐ Addition	
NAME	ROBERT C. DAVIDSON		4. 2 N/	AME						
STREET ADDRESS	1675 PALM BEACH LAK	ES BLVD.	4.3 ST	REET.	ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH, FL	33401	4 4 CF	TY-ST	r-ZIP					
TITLE		☐ DELETE	5.1 TIT					☐ Change	☐ Addition	
NAME			5.2 NA	ME						
STREET ADDRESS	.		5.3 ST	REET.	ADDRESS					
CITY-ST-ZIP			5.4 CIT	TY-ST	i-ZIP ·					
	<del> </del>	□ ne+ cte	61 TD	1 F				Change	Addition	

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

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

561-682-8000

Daytime Phone #