## 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 # P9600044799

Corporation Name

FINNIA C	JE LIGHTHOUSE POINT, IN	IC.								
Drincinal Place	of Rusiness	Mailing	Address					H DONE HOLL BUILD		(
Principal Place of Business Mailing Address										
1200 SE 15 AVE DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441										
							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Quali	fed		
							05/20/1996			
2. Principal P	lace of Business	<u> </u>	ng Add <u>r</u> ess .	•			4. FEI Number		1	olied For
21		26	A . #				65-0673565		\$8.75 A	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			e, Apt. #, etc.				5. Certificate of Status Desired	t 🗆	Fee Re	
22 City 8 Stat		27 City	& State				A. Flactice Compaign Financia		\$5.00	·
City & State	e	28	u Olale				<ol><li>Election Campaign Financi Trust Fund Contribution</li></ol>	''g 🗀	Added to	· .
Zip	Country	Zip		Country	,		8. This corporation owes the	current year Int		
24	25	29	30	- ·			Personal Property Tax.	Jun VIII , Juli III		<b>⊠</b> No
	9. Name and Address of Currer			1			10. Name and Address of Ne	w Registered	Agent	
***				81	Name	e				
SQUIRE, STEVEN F				82	Street	t Addres	s (P.O. Box Number is Not Acc	entable)		
625 NE THIRD AVE				"	000.		, , , o , <b>o</b> , o , o , o , o , o , o , o , o , o ,	·····		
FTL	AUDERDALE FL 33304			83						
				84	City				85 Zip C	ode
					1			FL	.	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Su	ch change was auth	lorized by	the cort	d corpora poration's	ation submits this statement for s board of directors. I hereby a	the purpose of scept the appoi	changing its ntment as rec	registered gistered
SIGNATURE										
	Signature, typed or printed name of registered age		` <u></u>		nt signature	e required w	nen reinstating)	DATE OFFICERS AN	ID DIRECTO	DC IN 12
12.	OFFICERS AN	AD DIRECTOR	DELETE .	13. 1.1 TITLE		1	ADDITIONS/CHANGES TO	OFFICERS AN	☐ Change	Addition
TITLE	XENAKIS, DEMETRIOS		December	1.2 NAME		1				_
NAME	1200 SE 15 AVE									
STREET ADDRESS	DEERFIELD BEACH FL 33441				T ADDRESS	~			•	
CITY-ST-ZIP	DEERFIELD BEACH FE 33441		☐ DELETE	1,4 CITY-\$ 2.1 TITLE	11-ZIP	-∤			☐ Change	Addition
TITLE	•		C DELETE	2.2 NAME						_
NAME		÷			T ADDRESS		-			ĺ
STREET ADDRESS				2.4 CITY-S		~	,			
CITY-ST-ZIP TITLE			☐ DELETE	3.1 TITLE	"الك" : ب	+	<u> </u>		☐ Change	Addition
NAME			_	3.2 NAME						
STREET ADDRESS					T ADDRESS	s				
CITY-ST-ZIP				3,4, CITY-5						
TITLE			☐ DELETE	4.1 TITLE	•		<u>-</u> -		☐ Change	☐ Addition
NAME				4. 2 NAME				•		ĺ
STREET ADDRESS		•		4.3 STREE	T ADDRESS	ss				}
CITY-ST-ZIP				4.4 CITY- S	T-ZIP					
TITLE			☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME	·			5.2 NAME		1				٠ أ
STREET ADDRESS				5.3 STREE	TADDRESS	is				
CITY-ST-ZIP				5.4 CITY-S	ST-ZIP		4-			
TITLE			☐ DELETE	6.1 TITLE					☐ Change	☐ Addition
NAME				6.2 NAME		1				

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

SIGNATURE:

SIGNATURE:

14.14 99 (954) 491 - 7334

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

(954) 491-7334

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90090 007 \*\*\*150.00