93 (ED 17 DM: 55

## ✓ 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 # P96000048895

1. Corporation Name

SIGNATURE:

ACRP, INC.

| Principal Place of Business Mailing Address                |   |  |   |   |  |  |
|--|---|--|---|---|--|--|
| 150 NO FEDERAL HIGHWAY STE 200<br>FORT LAUDERDALE FL 33301 |   | 150 NO FEDERAL HIGHWAY STE 200<br>FORT LAUDERDALE FL 33301   |   |   |  |  |
|  |   |  |   |   | DO NOT WRITE IN THIS SPACE   |  |
|  |   |  |   |   | 3. Date Incorporated or Qualifed   | İ  |
| 2. Principal Place of Business 2a. Mailing Address         |   |  |   |   | <b>06/06/1996</b><br>4. Ft: Number   | Applied For  |
| 21 26  |   |  |   |   | 65-0672296   | Not Applicable                                     |
| Suite, Apt. i  | #, etc.   | Suite, Apt #, etc  |   |   |  | \$8.75 Additional                                  |
| 27   |   |  |   |   | 5. Certificate of Status Desired   | Fee Required                                       |
| City & State   | 9   | City & State   |   |   | 6. Election Campaign Financing   | \$5.00 May Be                                      |
| 23   |   | 28   |   |   | Trust Fund Contribution  | Added to Fees                                      |
| Zip  | Country [25]  | Zip  | Country<br>30                                 | ,   | 8. This corporation owes the current year<br>Personal Property Tax   | Intangible No                                      |
| 24   | 9. Name and Address of Curren   |  | 30]   |   | 10. Name and Address of New Register   |  |
|  | <u> </u>  |  | В1  | Name  | •••  | · · · · · · · · · · · · · · · · · ·                |
| WILKES, JOHN P ESQ.  |   |  |   | Stroot Addr                                   | Address (P.O. Box Number is Not Acceptable)  |  |
| 150 NO FEDERAL HIGHWAY STE 200                             |   |  | 02  | Street Mour                                   | ess (F.O LIOX Namber is Not Acceptable)  |  |
| FOR  | r Lauderdale Fl. 33301  |  | 83  | 1   | •  | - · · · · · · · · · · · · · · · · · · ·            |
| •  |   |  | 84  | City  | _  | 85 Zip Code  |
|  |   |  |   | 1, 1  | ŗ  | ·L   [   |
| office or re   | to the provisions of Sections 607.050, egistered agent, or both, in the State of familiar with, and accept the obligations. | of Florida Such change was au  | thorized by                                   | the corporation                               | oration submits this statement for the purpose<br>ora's board of directors. I hereby accept the ap   | of changing its registered pointment as registered |
| SIGNATURE  |   |  |   |   |  |  |
|  | Signature typed or printed name of registered age.  | if and late of applicable (NO1E) D DIRECTORS   | Registere I Agra<br>■ 13.                     | disignatare negares                           |  | AND DIRECTORS IN 12                                |
| 12.  | D   | [ ] DELETE   | 1170LE  | 1   | ADDITIONS/CHANGES TO OFFICERS  | [   Change   E   Addition                          |
| NAME   | WILKES, JOHN P  | .,,  | 1.2 NAME                                      | 1   | 60000278   |  |
| STREET ADDRESS   | 150 NO FEDERAL HIGHWAY S  | TE 200   |   | LADORESS                                      | 60000278:<br>-02/23/33   | -01078006  |
| CITY-ST-ZIP  | FORT LAUDERDALE FL 33301  |  | 14 OTY-S                                      | 1.7P  | ****150.00   | 0 ****150.00                                       |
| TITLE  |   | E) DELETE  | 2171111                                       |   |  | []Change []Addition                                |
| NAME   |   |  | 2.7 NAME                                      |   |  |  |
| STREET ADDRESS   |   |  | 23 STREE                                      | 1 ADDRESS                                     |  |  |
| CITY-ST-ZIP  |   |  | 2 4 CiTY S                                    | ST-ZIP  | and the second s | FIGURE CITATION                                    |
| TITLE  |   | [ ] DELETE   | 3 1 TITLE                                     |   |  | [ Change []Addition]                               |
| NAME   |   |  | 3.2 NAME                                      | * 4000ccc                                     |  |  |
| STREET ADDRESS   |   |  | 1   | TADORESS                                      |  |  |
| CITY-ST-ZIP  |   | [   DELETE   | 34 CITY S<br>41 TIFLE                         | 51-211  |  | [   Change   |
| NAME   |   |  | 4 2 NAME                                      |   |  |  |
| STREET ADDRESS   |   |  |   | LADORESS                                      |  |  |
| CITY-ST-ZIP  |   |  | 44 GI*Y-S                                     | ļ   |  |  |
| TITLE  |   | EIDELETE   | 5 1 TITLE                                     |   |  | [   Change   [   Addition                          |
| NAME   |   |  | 5.2 NAME                                      |   |  |  |
| PTREET ADDRESS   |   |  | 53 STREE                                      | TADURESS                                      |  | ſ  |
| CITY-ST-ZIP  |   | · · · · · · · · · · · · · · · · · · ·  | 5.4 City S                                    | 1-26  |  | . Kreja in esti.                                   |
| TITLE  |   | (") DELETE   | 61 TITLE                                      |   | í  | [ ] Change [ ] Addition                            |
| NAME   |   |  | 6.2 NAME                                      | LADOVICE                                      |  | #10.00   |
| STREET ADDRESS   |   | )  | 6.4 CHY-S                                     | T ADDRESS                                     |  | 17.16  |
| CITY-ST-ZIP  | ertify that the information supplied wi   | th this filmin does not qualify for  |   |   | Section 119 07(3)(i), Florida Statutes, Lfurther   | certify that the information                       |
| indicated of<br>officer or of<br>Block 12 of               | on this annual report or supplemental<br>director of the corporation or the rece<br>or Block 13 if changed, or on an attack | annual report is true and accur<br>iver of fusite empowered to ex<br>imen. Atty an address, with all | ate and that<br>recute this r<br>other like e | t my signature<br>eport as requi<br>mipowered | Section 119.07(3)(i), Florida Statules. I further is shall have the same legal effect as if made ured by Chapter 607, Florida Statutes; and that   | inder oath; that I am an<br>it my name appears in  |