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

PROFIT CORPORATION ANNUAL REPORT 1999



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business	Mailing Address
9315 N.W. 49TH PLACE SUNRISE FL 33351	9315 N.W. 49TH PLACE SUNRISE FL 33351
2. Principal Place of Business	2a. Mailing Address
· · · · · · · · · · · · · · · · · · ·	
21	26 Suite, Apt. #, etc.
21	<u> </u>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90019 005 ***150.00



Principal Plac	e of Business	Mailing Address							
9315 N.W. 49TH		9315 N.W. 49TH PLACE			·				
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					- D-4-1-	DO NOT WR		SPACE	
						ncorporated or Qualifed 6/1996			•
					4. FEI NO				-0-15
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	#, etc. 100	Suite, Apt. #, etc.			5. Certifo	ate of Status Desired	_ ·	\$8.75 / Fee Re	
22		27							·
City & Stat	te -	City & State			1	n Campaign Financing		\$5.00	
23		28	Countr			und Contribution		Added	to rees
Zip	Country	Zip Country			1	orporation owes the cur	rent year int	angible Yes	□No
24	[25]		10			al Property Tax. and Address of New	Pagistared		
	9. Name and Address of Current	t Registered Agent	8	Nam		and Address of New	Registered	Agent	
WOL	FE, IRWIN	Commission of the Commission o	٦	1 110	iic				
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	IRISE FL 33351			<u>_</u>		ter man the second contact the con-	**** * ****** ***** * ******	11979 to 18	3 10 3 12 12 11
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11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	2 and 607.1508, Florida Statutes	s, the abor	ve-name	ed corporation submit	ts this statement for the firectors. I hereby acce	purpose of of the appoi	changing its ntment as re	registered aistered
agent. I a	am familiar with, and accept the obligati	ions of, Section 607.0505, Florid	la Statute	S.	nporation o board or t		Praise appe		g
SIGNATURE	Y								
	Signature, typed or printed name of registered agent	<u>''</u>		ent signatu	re required when reinstating)	```	DATE		
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14. 1 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 man attachment with an address, with all other like empowered.

SIGNATURE