Applied For

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

□No

Not Applicable \$8.75 Additional

## 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

30

81 Name

82

83

## DOCUMENT # P96000055044

9. Name and Address of Current Registered Agent

25

KRISSEL, MICHAEL

14636 SW 132 COURT **MIAMI FL 33186** 

1. Corporation Name

Zip

24

| Principal Place of Business         |       | Mailing Address                        |  |  |  |  |  |
|-------------------------------------|-------|--|--|--|--|--|--|
| 2515 SW 88 ST #316<br>MAMI FL 33186 |       | 12515 SW 88 ST. #316<br>MIAMI FL 33186 |  |  |  |  |  |
| Principal Place of Busi             | iness | 2a. Mailing Address                    |  |  |  |  |  |
|                                     |       |  |  |  |  |  |  |
| 21                                  |       | 26                                     |  |  |  |  |  |
| Suite, Apt. #, etc.                 |       | Suite, Apt. #, etc.                    |  |  |  |  |  |
| Suite, Apt. #, etc.                 |       | Suite, Apt. #, etc.                    |  |  |  |  |  |
| Suite, Apt. #, etc.                 |       | Suite, Apt. #, etc.                    |  |  |  |  |  |
| Suite, Apt. #, etc.                 |       | Suite, Apt. #, etc.                    |  |  |  |  |  |

29

**FILED** 

03-01-1999 90208 039 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

Trust Fund Contribution

Personal Property Tax.

Street Address (P.O. Box Number is Not Acceptable)

Election Campaign Financing

06/28/1996 4. FEI Number

65-0676995

|   |   |                        | 84           | City     |                   |                                    | FL                 | 85 Zip (        | Code       |  |  |  |
|---|---|------------------------|--------------|----------|-------------------|------------------------------------|--------------------|-----------------|------------|--|--|--|
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. |   |                        |              |          |                   |                                    |                    |                 |            |  |  |  |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  |   |                        |              |          |                   |                                    |                    |                 |            |  |  |  |
| 12.   | OFFICERS AND DIRECTORS                                    | 3 /                    | 13.          |          | ADDIT             | IONS/CHANGES TO                    | OFFICERS AN        |                 |            |  |  |  |
| TITLE   | D.  | DELETE                 | 1.1 TITLE    |          | $\mathcal{D}$ .   |                                    |                    | <b>⊉</b> Change | ☐ Addition |  |  |  |
| NAME  | MRISSEL, RAFEIDA  |                        | 1.2 NAME     | ļ        | KRISSEL           | -, RAFEIDA                         | •                  |                 |            |  |  |  |
| STREET ADDRESS  | 14636 SW 132 COURT  |                        | 1.3 STREET   | ADDRESS  | 14636 5           | W 132 CT                           | _                  |                 |            |  |  |  |
| CITY-ST-ZIP   | MIAMI FL 33186  |                        | 1.4 CITY-ST  | ZIP      | MIAMI             | -, RAFEIDA<br>W 132 CT<br>FL 33189 | <b>~</b>           |                 |            |  |  |  |
| TITLE   | D   | ☐ DELETE               | 2.1 TITLE    |          |                   |                                    |                    | ☐ Change        | Addition   |  |  |  |
| NAME  | KRISSEL, MICHAEL  |                        | 2.2 NAME     |          |                   |                                    |                    |                 |            |  |  |  |
| STREET ADDRESS  | 14636 SW 132 COURT  |                        | 2.3 STREET   | ADDRESS  |                   |                                    |                    | ,               |            |  |  |  |
| CITY-ST-ZIP   | MIAMI FL 33186  |                        | 2. 4 CITY-S1 | -2IP     |                   |                                    |                    |                 |            |  |  |  |
| TITLE   |   | ☐ DELETE               | 3.1 TITLE    |          | 100               | <del> </del>                       |                    | ☐ Change        | ☐ Addition |  |  |  |
| NAME  |   |                        | 3.2 NAME     |          |                   |                                    |                    |                 | ļ          |  |  |  |
| STREET ADDRESS  |   |                        | 3.3 STREET   | ADDRESS  |                   |                                    |                    |                 |            |  |  |  |
| CITY-ST-ZIP   |   |                        | 3.4. CITY-S1 | -ZIP     |                   |                                    |                    |                 |            |  |  |  |
| TITLE   |   | ☐ DELETE               | 4.1 TITLE    |          |                   | <del></del>                        |                    | Change          | ☐ Addition |  |  |  |
| NAME  |   |                        | 4. 2 NAME    | ļ        |                   |                                    |                    |                 |            |  |  |  |
| STREET ADDRESS  |   |                        | 4.3 STREET   | ADDRESS  |                   |                                    |                    |                 |            |  |  |  |
| CITY-ST-ZIP   |   |                        | 4.4 CITY-ST  | -ZIP     |                   |                                    |                    |                 |            |  |  |  |
| TITLE   |   | ☐ DELETE               | 5.1 TITLE    |          |                   |                                    | •                  | Change          | Addition   |  |  |  |
| NAME :  |   |                        | 5.2 NAME     |          |                   |                                    |                    |                 |            |  |  |  |
| STREET ADDRESS  |   |                        | 5.3 STREET   | ADDRESS  |                   |                                    |                    |                 |            |  |  |  |
| CITY-ST-ZIP   | . <u></u>   |                        | 5.4 CITY-ST  | -ZIP     |                   |                                    |                    |                 |            |  |  |  |
| TITLE   |   | ☐ DELETE               | 6.1 TITLE    |          |                   |                                    |                    | ☐ Change        | ☐ Addition |  |  |  |
| NAME  |   |                        | 6.2 NAME     |          |                   |                                    |                    |                 |            |  |  |  |
| STREET ADDRESS  |   |                        | 6.3 STREET   | ADDRESS  |                   |                                    | •                  |                 |            |  |  |  |
| CITY-ST-ZIP   |   |                        | 6.4 CITY-ST  |          |                   |                                    |                    |                 |            |  |  |  |
| 44 I basabu s   | ertify that the information supplied with this filing doe | se not qualify for the | a evemetic   | n stated | Lin Section 119 ( | 07/3\(i) Florida Statut            | tes. I further cer | tify that the i | nformation |  |  |  |

indicated on this annual effort or supplied with all similar uses not quality for the exemption stated in section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual effort or suppliemental 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 of the receiver or trustee entrowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 if changed, or on an attachment with an address, with all other like empowered.

SIGNING OFFICER OR DIRECTOR