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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 02, 1999 8:00am

**Secretary of State** 

02-02-1999 90005 039 \*\*\*150.00

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000057689**

1. Corporation Name

Principal Place of Business

THE ULTIMATE DEMO, INC.

900 S.W. 125TH BLDG. R101 PEMBROKE PINI		900 S.W. 125TH WAY BLDG. R101 PEMBROKE PINES FL 33027				DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed		
		•				07/09/1996	•	
2. Principal Pl	ace of Business	2a. Mailing Address	3			4. FEI Number	App	olied For
21		26				65-0684459	Not	Applicable
Suite, Apt. #, etc.		<del></del>	Suite, Apt. #, etc.			5. Certifcate of Status Desired   \$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
		<b>⊢</b> ' ′	28			Trust Fund Contribution Added to Fees		
23 Tin	Country	Zip	Cou	intry		8. This corporation owes the current year in	ntangible	
Zip		29	30			Personal Property Tax.	Yes	∐Ńo ∣
24	9. Name and Address of Curre	·	1301	Τ		10. Name and Address of New Registered	l Agent	
<del></del>	9. Name and Address of Curre	ilt Keğistelen Ağalıt		81	Name			
MAR	IA E. TAYLOR	,, ,						
11531 NW 18TH ST.		:	82 Street A		Street Addre	ess (P.O. Box Number is Not Acceptable)		
	BROKE PINES FL 33026					The second secon	4 5	*1.5
FEMI	DRUNE FINES FL 33020			83			1 Stanton	2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				84	City	FI	85 Zip C	ode
	File 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	02 and 607 1509 Florida	Statutes the a	hove	-named como	oration submits this statement for the purpose of	of changing its	registered
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	antelonna auch change	was audionzed	4 U V	life corporation	n's board of directors. I hereby accept the appo	ointment as reg	gistered
SIGNATURE	grand and the many and the many and the same	Company and garden				·		
SIGNATURE	Signature, typed or printed name of registered ag		<u> </u>	Agen	t signature required		ND DIRECTO	DC IN 12
12.	OFFICERS A	ND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition
TITLE	<b>D</b>	. DELE	ETE 1.1 TI	TLE			☐ cuarige	☐ Yourson
NAME	WONG, CARMEN W				1			!
THE RESERVE AND ADDRESS OF THE PARTY OF THE			1.2 N	AME	1			
STREET ADDRESS		R101			raddress			
STREET ADDRESS		R101	1.3 \$					
CITY-ST-ZIP	900 S.W.1 25TH WAY BLDG.	R101	1.3 S	TREET			☐ Change	☐ Addition
CITY-ST-ZIP TITLE	900 S.W.1 25TH WAY BLDG.		1.3 S	TREET ITY-S' ITLE			☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME	900 S.W.1 25TH WAY BLDG.		1.3 ST 1.4 CI ETE 2.1 TI 2.2 No	TREET ITY-S' ITLE AME	T-ZIP		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	900 S.W.1 25TH WAY BLDG.		1.3 S <sup>2</sup> 1.4 Ct ETE 2.1 Π 2.2 N 2.3 S <sup>2</sup>	TREET  TLE  AME	T-ZIP  FADDRESS		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	900 S.W.1 25TH WAY BLDG.	DELE	1.3 S <sup>*</sup> 1.4 Cl ETE 2.1 π 2.2 N 2.3 S <sup>*</sup> 2.4 C	TREET THE AME TREET	T-ZIP		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	900 S.W.1 25TH WAY BLDG.		1.3 ST 1.4 CI 2.1 TI 2.2 N. 2.3 ST 2.4 CI ETE 3.1 TI 3.1 TI	TREET  ITY-ST  ITLE  AME  TREET  CITY-ST  ITLE	T-ZIP  FADDRESS			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	900 S.W.1 25TH WAY BLDG.	DELE	1.3 ST 1.4 CI   ETE	TREET TITLE AME TREET TREET CITY-S TITLE	T-ZIP  F ADDRESS ST-ZIP			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	900 S.W.1 25TH WAY BLDG.	DELE	1.3 ST 1.4 CI   2.1 TI   2.2 N.   2.3 ST   2.4 CI   3.1 TI   3.2 N.   3.3 ST   3.3 S	TREET TITLE AME TREET TITLE TREET TITLE TREET	T-ZIP  FADDRESS ST-ZIP  FADDRESS	· · · · · · · · · · · · · · · · · · ·		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	900 S.W.1 25TH WAY BLDG.		1.3 ST 1.4 CI   2.1 TI   2.2 N.   2.3 ST   2.4 C   ETE	TREET TITLE AME TREET TITLE LITTLE LITTLE LITTLE TREET TREET	T-ZIP  F ADDRESS ST-ZIP		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	900 S.W.1 25TH WAY BLDG.	DELE	1.3 ST 1.4 CD 2.1 TD 2.2 N. 2.3 ST 2.4 CD 3.1 TD 3.2 N. 3.3 ST 3.4 CD ETE 4.1 TD 4.1 T	TREET TITLE AME TREET TITLE	T-ZIP  FADDRESS ST-ZIP  FADDRESS			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	900 S.W.1 25TH WAY BLDG.		1.3 S' 1.4 CI 2.1 TI 2.2 N. 2.3 S' 2.4 C ETE 3.1 TI 3.2 N. 3.3 S' 3.4 C ETE 4.1 TI 4.2 N	TREET TY-S TILE AME TREET TREET TREET TREET TREET TREET TREET TREET	T-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	900 S.W.1 25TH WAY BLDG.		1.3 S' 1.4 CI 2.1 TI 2.2 N. 2.3 S' 2.4 C ETE 3.1 TI 3.2 N. 3.3 S' 3.4 C ETE 4.1 TI 4.2 N	TREET TY-S TILE AME TREET TREET TREET TREET TREET TREET TREET TREET	T-ZIP  FADDRESS ST-ZIP  FADDRESS		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	900 S.W.1 25TH WAY BLDG.	□ DELE	1.3 ST 1.4 CD 2.1 TD 2.2 N. 2.3 ST 2.4 CD 3.1 TD 3.2 N. 3.3 ST 3.4 CD ETE 4.1 TD 4.2 N. 4.3 ST 4.4 CD 4.4 C	TREET TTY-S' TILE AME TREET AME TREET	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	900 S.W.1 25TH WAY BLDG.		1.3 ST 1.4 CD 1.5 TE 1.	TREET TITY-S TITE AME TREET	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	900 S.W.1 25TH WAY BLDG.	□ DELE	1.3 ST 1.4 CD 2.1 TD 2.2 N. 2.3 ST 2.4 CD 3.1 TD 3.2 N. 3.3 ST 3.4 CD ETE 4.1 TD 4.2 N. 4.3 ST 4.4 CD 4.4 C	TREET TITY-S TITE AME TREET	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME	900 S.W.1 25TH WAY BLDG. PEMBROKE PINES FL 33027	□ DELE	1.3 ST 1.4 CD 1.5 CD 1.3 ST 1.4 CD 1.5 CD 1.	TREET TITY-S TITLE AME TREET CITY-S TITLE AME TREET TR	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	900 S.W.1 25TH WAY BLDG. PEMBROKE PINES FL 33027	□ DELE	1.3 ST 1.4 CD 1.5 CD 1.	TREET TITY-S TITLE AME TREET CITY-S TITLE AME TREET TR	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP		☐ Change	Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

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.