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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Mar 01, 1999 8:00 am Secretary of State

	1000	DIVISION	ON OF CORP	PORATIONS		03-01-1999 900	008 006 ***1	50.00
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DOCUN	MENT # P96000	061874						
i. Corporation	THUITE							
WE CARE	e of the palm beaches,	INC.				and a series and a	Ann Bri Br 4: 864 (6/18 (6	E41 6421 (611
				•				e h lik iek
Principal Place	of Business	Mailing Address						
5180 W. ATLAN	TIC AVE	5180 W. ATLANTIC	; AVE		1			
SUITE 120	o enana	SUITE 120 DELRAY BEACH F	33484			DO NOT WRITE IN T	HIS SPACE	
DELRAY BEACH US	FC 33484	US	. 55101		3.	Date Incorporated or Qualifed		
				_		07/24/1996		
2. Principal Pt	ace of Business	2a. Mailing Addre	:55			FEI Number		lied For
21		26				65-0686314		Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #,	etc.		5.	Certificate of Status Desired - 1	\$8.75 A. Fee Red	
22		27			-		\$5.00	
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution	Added to	
23		Zip		Country		This corporation owes the current year		
Zip	Country	- 20	30			Personal Property Tax.	Yes	□No
24	9. Name and Address of Current	Registered Agent	1991			Name and Address of New Registe	red Agent	
	<u> </u>			81 Name				1
JOVA	ANOVICH, NICK			82 Street	Address IP	O. Box Number is Not Acceptable)		
BERC	GER DAVIS & SINGERMAN		•					
, , , , ,	NE 3RD AVENUE #400			83				!
j FT. L	AUDERDALE FL 33301			84 City			85 Zip C	cde
)				1. 1				
11. Pursuant (to the provisions of Sections 607.0502	and 607.1508, Florid	la Statutes, th	e above-named	corporation oration's bo	submits this statement for the purposerd of directors. I hereby accept the a	e of changing as reg opointment as reg	istered
agent. Lat	n familiar with, and accept the obligation	ons of Section 607.0	505, Florida S	Statutes.				Ţ
SIGNATURE						instates) DATE		
· ·	Signature, typed or printed name of registered agent							
40				tered Agent signsture r 43.	A manus annual	ADDITIONS/CHANGES TO OFFICERS		S IN 12 &
12.	OFFICERS AN	DIRECTORS		13.	A A	ADDITIONS/CHANGES TO OFFICERS		RS (N 12 0)
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I hereby certify that the information supplied with this hing does not quality for the examples stated in Section 118.07(1), in least supplied with this hing does not quality for the examples and that my signature shall have the same legal effect as if made under each; 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.