## 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

## Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90203 018 \*\*\*150.00

## DOCUMENT # P96000064163

1. Corporation Name

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e of Business	Mailing Address			
DINT DRIVE	3530 MISTIC POINT DRIVE			
221.00	••••		DO NOT WRITE IN TH	IS SPACE
33180	AVENTURA PL 33100			0017102
			1	
lace of Business	2a Mailing Address		4. FEI Number	Applied For
		4657		Not Applicable
		.03.		\$8.75 Additional
,, c.c.	— · · · · ·		5. Certifcate of Status Desired	Fee Required
le			6 Election Campaign Financing	\$5.00 May Be
م. ۱		FIA.	Trust Fund Contribution	Added to Fees
Country	Zip	Country	a. This corporation owes the current year I	ntangible
181 25 12 0.0	29 33181 3	o U.S.A	Personal Property Tax.	Yes 🗆 No
			10. Name and Address of New Registere	d Agent
		81 Name	ASSE SULPHIL	
AMSILI, DANIEL 3530 MISTIC POINT DRIVE				
) MISTIC POINT DRIVE				
E 2910		83		
NTURA FL 33180				85 Zip Code
		84 City N	I MIBNI F	L 85 Zip Code
to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the purpose	of changing its registered
			on's board of directors. I hereby accept the app	ointment as registered
	anono di, dodacii da libada, libila		1-78-99	7, 1
	ent and title if applicable. (NOTE; R.	egistered Agent signature require	d when reinstating) DATE	<del></del>
OFFICERS AF	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
PSTD	☐ DELETE	1.1 TITLE	•	☐ Change ☐ Addition
SADOUN, JOSEF		1.2 NAME		ļ
1270 95TH ST.		1.3 STREET ADDRESS		}
BAY HARBOR FL 33154		14 CITY-ST-ZIP		
	☐ OELETE	2.1 TITLE		☐ Change ☐ Addition
		2.2 NAME		ļ
		2.3 STREET ADDRESS		
		2. 4 CITY-ST-ZIP		
	☐ DELETE	3.1 TITLE		Change Addition
		3.2 NAME		
		3.3 STREET ADDRESS		
		3.4. CITY-ST-ZIP		
	☐ DELETE	4.1 TITLE	<del></del>	☐ Change ☐ Addition
		4. 2 NAME		
		4 3 STREET ADDRESS		
		4.4 CITY-ST-ZIP		
	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
		5.2 NAME		
		5.3 STREET ADDRESS		
		5.4 CITY-ST-ZIP	·	
	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
		6.2 NAME		
	e of Business DINT DRIVE 33180  Place of Business  INE 146 ST  #, etc.  Ite  Country  9. Name and Address of Curre  ILI, DANIEL  MISTIC POINT DRIVE E 2910  NTURA FL 33180  Ito the provisions of Sections 607.05  registered agent, or both, in the State am familiar with, and accept the ethic  Signature, upded of parties may be registered age  OFFICERS ANDOUN, JOSEF 1270 95TH ST.	DINT DRIVE 3530 MISTIC POINT DRIVE SUITE 2910 AVENTURA FL 33180  Place of Business    2a	e of Business DINT DRIVE  3530 MISTIC POINT DRIVE SUITE 2910 AVENTURA FL 33180  Place of Business  12a. Mailing Address 12b. 12b. 12c. 12c. 12c. 12c. 12c. 12c. 12c. 12c	Business  Mailing Address  S30 MSTIC POINT DRIVE  S3180  AVENTURA FL 33180  Country  216  Country  227  Country  238  3- All Fell Number  65-0688215  5. Certificate of Status Desired   Country  Country  239  3- All Flow Flow Flow Flow Flow Flow Flow Fl

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.

6.4 CITY-ST-ZIP

SIGNATURE:

PREDIGENE .. PRINTED NAME OF SIGNING OFFICER OR DIRECTOR