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**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000067881

## **FILED** Mar 24, 1999 8:00 am Secretary of State

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	CEAN DRIVE HOTEL CORP.							
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Principal Plac	e of Business	Mailing Address	·		-	iki dakil dalila a		INTELLIBIT INCI
	BROOKE ST WEST	666 RUE SHERBROOKE ST V	WEST					
PENTHOUSE 2300 PENTHOUSE 2300								
MONTREAL QUEBEC CANADA MONTREAL QUEBEC CANADA					DO NOT WRI	TE IN THIS	SPACE	
}					3. Date Incorporated or Qualifed			1
					08/13/1996			
L '	lace of Business	2a. Mailing Address			4, FEI Number		Ap	plied For
21		26			65-0687453			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75	4
22		27					Fee Re	
City & Stat	e	City & State			6. Election Campaign Financing		\$5.00	
23		28			Trust Fund Contribution		Added	o Fees
Zip	Country	Zíp	Country		8. This corporation owes the curr	ent year Inta	ngible Yes	□No
24	9. Name and Address of Current	29 3	0		Personal Property Tax.  10. Name and Address of New F	Pagistared (		LINO
	9. Name and Address of Current	Kağıstaran Ağerit	81	Name	IV. Name and Address of New F	registered y	- Gent	
PERI	OFF, JOHN W							
1177 SE THIRD AVENUE			82	Street Addre	ss (P.O. Box Number is Not Accepta	able)		ł
	T LAUDERDALE FL 33316		83	ļ	71			
. •			63	}				j
			84	City		FL	85 Zip (	Code
44 - D	1.4		# <b>h</b> a a b a		and in a sharita this statement for the		hanaina ita	ragistarad
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	' Florida. Such change was autl	horized by	the corporation	n's board of directors. I hereby accep	ot the appoin	tment as re	gistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statutes					
SIGNATURE								
12.	Signature, typed or printed name of registered agent of OFFICERS AND		13.	nt signature required	ADDITIONS/CHANGES TO OF	DATE EICERS AND	DIRECTO	PS IN 12
TITLE	D	□ DELETE	1.1 TITLE	I -	ADDITIONS/CITANGES TO OF	FICEING AIN	Change	Addition
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CITY-ST-ZIP		RT .	13 970553	T ADDDESS				
GIT-31-2P		<b>ड</b> ा	1.3 STREET	· · · · · · · · · · · · · · · · · · ·				
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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 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 or the reviewer 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 affording the empowered.

**SIGNATURE:** 

AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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