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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000068478

Feb 24, 1999 8:00 am Secretary of State

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24 3301			29		30				Personal Property Tax.		☐Yes	□No	
	9. Name and Addr	ess of Current R	Registere	ed Agent		-		10). Name and Address of Nev	Registered	Agent		ł
MEG	20.404.0					81	Name			•			
	SO, ISAAC					82	Street Ad	idress (P.O. Box Number is Not Acce	ptable)			}
	BRICKELL AVE												ł
STE						83							
MIAN	MI FL 33129					84	City			C.I	85 Zip	Code]
		1								F_L	f changing its	registered	1
11. Pursuant	to the provisions of Se	ctions/907.0502 a	anyangaru / . I	ISUX FIORIDAS				มเบบเลแเ	on anomina mia aratement ioi d	ie puipose o	i changing its	registered	
office or re	egisterea agent, or bot	h, ip 26 e State	officia. S	Such change w	as autho	rized by	the corpora	ation's b	poard of directors. I hereby acc	ept the appo	intment as re	egisterea	
office or re agent. I a	egistered agent, or bot m familiar with, and ac	h, ip/se State/s/	ns of Se	Such change w ction 607.0505	as autho Florida	rized by Statutes	the corpora	ation's b	on submits this statement for to courd of directors. I hereby acc	ept the appo	ointment as re	egisterea	
SIGNATURE	La La									cept the appo	99	egistered	
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SIGNATURE	Signature, typed or printer har		nd title if app	olicable. ((NOTE: Regi			ired when		PATE	39		100,11
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I hereby certify that the information supplied with this filling does not of indicated on this annual report or supplemental annual report is true officer or director of the corporation or the receiver or trustee emp

demption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an an intermity seport as required by Chapter 607, Florida Statutes; and that my name appears in other like empowered.

305 805 OT 21