**FILED** 

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90055 034 \*\*\*158.75

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

**PROFIT** CORPORATION ANNUAL REPORT ...

1999: 3 al



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000073025

1. Corporation Name

THE EQU	JIS GROUP, INC.								
Principal Place	of Business	Mailing Address	••••				18 illii 8	0 1 0 0 1 0 0 1 0 1 1 1 1 0 0 1 1 1 0 0 1 1 1 0 0 1 1 1 0 0 1 1 1 0 0 1	
9420 SOUTHWEST 77TH AVENUE 9420 SOUTHWEST 77TH AVE				NUE					
**************************************						DO NOT WRITE IN THIS SPACE			
	•					3. Date Incorporated or Qualifed 09/04/1996			
Principal Place of Business     2a. Mailing Address						4. FEI Number		Applied For	
21 26						65-0737967		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certifcate of Status Desire		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State City & State			· • • • ·		6. Election Campaign Financing Trust Fund Contribution	- 11		
Zip	Country	Zip	Co	untry	,	This corporation owes the current year Intangent			
24	25 29 3			<b>⊣</b> .		Personal Property Tax.			
	9. Name and Address of Current	t Registered Agent		T		10. Name and Address of New Registered Ag	ent		
					Name	,			
CORPORATION SERVICE COMPANY				82	Street Addr	dress (P.O. Box Number is Not Acceptable)			
1201 HAYS STREET				51 dat Address (F.O. Dox Hamber is Not Acceptable)					
TALLAHASSEE FL 32301				83					
ļ				84	City	. FL	85 Z	ip Code	
				<u> </u>				ita conintered	
( office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligati	of Florida. Such change was	authorize	d by	the corporation	pration submits this statement for the purpose of chan's board of directors. I hereby accept the appointment	anging nent as	registered	
SIGNATURE	1964 A 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
Oldrivinoria:	Signature, typed or printed name of registered agent				nt signature required				
12.		D DIRECTORS''	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PD DELETE			1.1 TITLE		L	_ Chan	ge 🗌 Addition	
NAME	CAUFF, STUART			1.2 NAME				ì	
STREET ADDRESS				1.3 STREET ADDRESS				Ì	
CITY-ST-ZIP	MIAMI FL 33156-7903			1.4 CITY-ST-ZIP					
TITLE	S □ DELETE			2.1 TITLE			Chan	ge 🗌 Addition	
NAME	MILSTEIN, BRIAN			2.2 NAME					
STREET ADDRESS	9420 SOUTHWEST 77TH AVENUE			2.3 STREET ADDRESS					
CITY+ST+ZIP	⊪ MIAMI FL 33156-7903			2. 4 CITY-ST-ZIP					
TITLE	☐ DELETE		- 3.1 T	3.1 TITLE			-] Chan	ge 🔲 Addition	
NAME			3.2 N	IAME		•		ļ	
STREET ADDRESS			3.3 \$	TREE	TADORESS				
CITY-ST-ZIP			3.4. (	CITY-S	ST-ZIP				
TITLE		☐ DELETE	4.1 T	TLE			Chan	ge 🗌 Addition	
NAME			4.21	NAME					

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 tustee 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 additional statutes, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

SIGNATURE: >

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Change

Change

Addition

Addition