SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000073574

CHARLES SALTSMAN INC.

5380 NW 31 STREET MARGATE FL 33063	5380 NW 31 STREET MARGATE FL 33063

FILED Sep 22, 1999 8:00 am Secretary of State

09-22-1999 90001 023 ***150.00



Principal Place of Business Mailing Address											
MARGATE FL 3008 MARGATE FL 2008 D. HOT WRITE IN THIS SPACE	Principal Place of Business Mailing Address							- I INDICATE THE INVESTIGATION OF THE BUTTER			
Principal Place of Business 2s. Maining Address 4. FEL Number Ageiled For		=						DO NOT WRITE IN THIS SPACE			
2. Principal Places of Business 2. Making Address 4. FEI Number Applied For Special Places 5. Certificate of Status Desired 5. Certificate 5. Cert								3. Date Incorporated or Qualified			
Sulfa, Apt. #, etc. Sulfa, Ap								09/05/1996			
Sulfe, Apt. #, etc. Sulfe, Apt. #, etc.	2. Principal Pi	ace of Business	2a. Maili	2a. Mailing Address							
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28	Suite, Apt.	#, etc.	⊢—	⊢ ¬ ' ' '				5. Certificate of Status Desired Fee Required			
Zip	_	e		City & State				1 1 1 1 1 1 1 1			
3. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent SALTSMAN, CHARLES 5380 NW 31 STREET MARGATE FL 33063 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 95 Zip Code 85 City FL 95 Zip Code 86 City FL 95 Zip Code 87 City FL 95 Zip Code 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 95 Zip Code 85 Zip Code 86 City FL 95 Zip Code 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 95 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 City FL 95 Zip Code 87 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 84 City 85 Street Address (P.O. Box Number is Not Acceptable) 86 City FL 95 Zip Code 87 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Accep	23	·····									
9. Name and Address of Current Registered Agent SALTSMAN, CHARLES \$380 NW 31 STREET MARGATE FL 33063 19. Name and Address of Current Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of sections 507.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, and accept the obligations of, section 607.6505, Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITYST2P 15. TITLE 16. Change Addition 16. WARCATE FL 16. Change Addition 17. AMACHALES 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Change Addition 10. Change Addition 10. Change Addition 10. Change Addition 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ACTYST2P 13. TITLE 14. CITYST2P 14. CITYST2P 15. TITLE 16. Change Addition 16. Value 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 29. AD		— ·		<u>├</u> ─┐ '							
SALTSMAN, CHARLES 5380 NW 31 STREET MARGATE FL 33063 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of sections 607.0502 and 607.1508, Fibrids Statutes, the above-more despectation submits this statement for the purpose of changing its registered agent, or poth, in the State of Fibrids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, section 607.0505, Florids Statutes, the above-more directors in the purpose of changing its registered agent, I am familiar with, and accept the obligations of, section 607.0505, Florids Statutes, be above-more directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, section 607.0505, Florids Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITHE P. ADITIONS SALTSMAN, CHARLES 12. NAME SALTSMAN, CHARLES SARTSMAN, KATHERN SALTSMAN, KATHERN S	24						mangoro Coconar Topony.				
S380 NW 31 STREET MARGATE FL 33063		9. Name and Address of Cur	rent Registered	- Adent	8						
S380 NW 31 STREET MARGATE FL 33063	SALT	SMAN, CHARLES			<u> </u>	1		(2.2.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
11. Pursuant to the provisions of sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, section 670,050.5 Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS 13. TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME SALTSMAN, CHARLES 13. STREET ADDRESS 5380 NW 31 ST 13. STREET ADDRESS CITY-ST-ZIP MARGATE FL 14. CITYST-ZIP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME SALTSMAN, KATHERN 22. NAME 33. STREET ADDRESS CITY-ST-ZIP MARGATE FL 14. CITYST-ZIP DELETE 31. TITLE DELETE 31. TITLE DELETE 41. TITLE DELETE 31. TITLE Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS	5380	NW 31 STREET					Street Addre	et Address (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of sections 607.0502 and 807.1508, Florida Substate, the above-named corporation submite this statement for the purpose of changing liss registered office or registered agent, or both, in the State of Florida. Such change was an about the provisions of sections 607.0502 and 807.1508, Florida Substate. The above-named corporation submite this statement for the purpose of changing liss registered office or registered agent, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE 12.	MMN	3ATE FE 33003					011	Ins. 7in Code			
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE			nhla (Ní	OTE: Panistara	1 40	sent signature regul	red when reinstating) DATE			
TITLE	12.										
NAME SALTSMAN, CHARLES 12 NAME						<u> </u>					
STREET ADDRESS 5380 NW 31 ST	NAME	SALTSMAN, CHARLES		_ :===			ļ				
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	CITY-ST-ZIP	adification info	with this files de	ne not qualify for	6.4 CITY	-ST	-ZIP	tion 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.

SIGNATURE: