FILE	NOW: FILING F	EE AFTER M	AY 1ST IS	<b>\$</b> 55	0.00		
	PROFIT RPORATION UAL REPORT		COF DA DEPA	n ki	M	1	FILED
	1999 DIVISION OF COLPOR LONS						99 DEC -1 AM 9: 20
DOCUMENT # P9(2000) 16564						SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Gue	d Time Cor	nmunicat.	ins in	۷C،			
ı	,	li	4400	DDA	Rloba	17	
Principal Place of Business Mailing Address							
7430 NW 15 place plantation							
FL. 33314							DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed
							a. Date incorporated or equality
	Principal Place of Business  Rth To M AS 28. Mailing Address 28. Mailing Address 28.						4. FEI Number 59-3403207 Applied For Not Applied For
Suite, Apt		Suite,	Apt. #, etc.	c.			6. Certificate of Status Desired 38.75 Additional
City & Sta	te	27 City 8	State				6. Election Campaign Financing \$5.00 May Be
23	0	28					Trust Fund Contribution Added to Fees
Zip 24	Country 25	2ip	Į.	Cou 30	intry		8. This corporation owes the current year intangible Personal Property Tax.
	9. Name and Address of	Current Registered A	\gent	•	81 Name		10. Name and Address of New Registered Agent
	<b>v</b> v					<u>o k</u>	
	,					Addres	ss (P.O. Box Number is Not Acceptable)
					43 74	30	NW 15h Place
			· t		84 City	PI	autation FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections (	307.0502 and 607.1500 State of Florida, Suc	8, Florida Statute h change was au	s, the al	by the corp	corpor	ration submits this statement for the purpose of changing its registered is board of directors. I hereby accept the appointment as registered
agent. I a SIGNATURE	$A \rightarrow A$	obligations of, Séctio	n 607.0505, Flori		1195 1195	P	resident 11-12-99
	Signature, typed or printed name of region	tered agent and title if applicable	ia. (NOTE: I	hogistered	Agent signature	required w	when rehability) DATE
TITLE	P, V, T,S, D	ERS AND DIRECTORS	DELETE	13.	î.E	1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	OraTomas			1.2 104	ME		3000030704230
STREET ADDRESS	1420 1444 1 17				REET ADDRESS		-12/15/9301009016
CITY-ST-ZIP TITLE	Plantotida, F	( 3331)	DELETE	1.4 CT	IV-8T-ZIP		****465_00 ****465_00 □ Change □ Addition
NAME				22 M		ļ	Cloude Clause
STREET ADDRESS				2.3 81	REET ADDRESS		
CITY-ST-ZIP TITLE			D DELETE	2.4 CI 3.1 TIT	TY-81-ZIP		☐ Change ☐ Additio
NAME			C;;-	3.2 NA			
STREET ADDRESS			•	3.3 ST	REET ADDRESS	ļ	
CITY-ST-ZIP			O DELETE		TY-ST-ZIP		
NAME			☐ DELETE	4.1 TIT		1	☐ Change ☐ Addition
STREET ADDRESS					REET ADDRESS		
CITY-ST-ZIP				4.4 CT	Y-ST-ZIP		
TITLE			☐ DELETE	6.1 TIT			☐ Change ☐ Addition
NAME STREET ADDRESS				5.2 NA	ME REET ADDRESS		
CITY-ST-ZIP				1	Y-87-27P		
TITLE			☐ DELETE	6.1 TIT			☐ Change ☐ Addition
NAME				6.2 NA	ME		
STREET ADDRESS					REET ADDRESS		
CITY-ST-ZIP	ertify that the information areas	ylad with this films doe	e not qualify to-		Y-81-ZIP	la Se	reion 110 07/2Vi) Elarida Clatida I furbar angli, that the later and
indicated officer or officer to the second of the second o	on this annual report or supple director of the corporation or the or Block 13 if changed, or on a	emental annual report in the receiver or trustee a in attachment with an i	is true and accura is true and accura impowered to axi address, with all o	ite and soute the other like	inatiny sign that my sign is report as a smpowere	ature s required d.	ction 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under ceth; that I am an old by Chapter 607, Florida Statutes; and that my name appears to
			_		-		VE

954-581-2497 Deptime Phone #

BONA TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: (

To whom this may concern,

Please accept the enclosed cheek for the amount of 465 for the angual report fees for the years 17, 98, 99.

Please understand that I never received any of these annual reports for any of these years and that's is the reason for the delay.

I Think There was another registered agent who possibly received their reports.

I hope you'll be understanding and brind enough to abate any reinstatement fees of penaltils due to These concomstances:

Sincely Jours.
Open Thomas.
Porilate
Good hime Conn. ine