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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600077239

1. Corporation	n Name	0077200			ì			
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Principal Place	e of Business	Mailing Address			-		<b>                                    </b>	ANTIB YOYI YOYI
2237 CORAL WAY 2237 CORAL WAY								
MIAMI FL 33145 MIAMI FL 33145			ř					
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					3. Date Incorporated or C	Qualifed		
					09/17/1996		<u> </u>	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		<u> </u>	olied For
21		26			65-0694985		\$8.75 A	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status De	esired 🔲	Fee Rec	
22	<u> </u>	City & State		<u>:</u>	a Firsting Compaign Fig		\$5.00	
City & State	e	<b>├</b> ┐ ′			6. Election Campaign Fir Trust Fund Contribution	- 11	Added to	
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Zip	25	29	30	,	Personal Property Tax			□No
24)	9. Name and Address of Curr	<u> </u>	-[30]		10. Name and Address of		Agent	
			81	Name				
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			84	City		FL	_	
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11. Pursuant office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607.1508, Florida Statute of Florida. Such change was		- '	oration submits this statemen on's board of directors. I here		_	registered gistered
	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the obli	502 and 607.1508, Florida Stati te of Florida. Such change was gations of, Section 607.0505, Fl		- '	oration submits this statemen on's board of directors. I here		_	registered gistered
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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 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 chapged, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1-19-99

**FILED** 

Feb 08, 1999 8:00am

**Secretary of State** 

02-08-1999 90018 022 \*\*\*150.00

(305) 856-573

CK2E034 (11/98)