## 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

## **FILED** May 06, 1999 8:00 am Secretary of State

05-06-1999 90054 003 \*\*\*150.00

DOCUMENT #	D00000070004
DOCOMENT#	P96000078834

1. Corporation Name

MCKENDALL GROUP, INC.

Fillicipal Flace of Eddinose
2455 EAST SUNRISE BLVD.
SUITE 300 - INTERNATIONAL BLDG.
CODT I AUDERDALF EL 33304

Mailing Address

2455 EAST SUNRISE BLVD.



FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304			DO NOT WF			RITE IN THIS SPACE		
				3.	Date Incorporated or Qualifed			
						09/20/1996		
2. Principal Place of Busine	ss 2	a. Mailing Address			4.	FEI Number		Applied For
21	26					65-0709339	[	Not Applicable
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.				Certifcate of Status Desired		75 Additional e Required
City & State	29	City & State			6.	Election Campaign Financing Trust Fund Contribution	• -	.00 May Be ded to Fees
Zip	Country 29	¬ `	untry		8.	This corporation owes the current year Personal Property Tax.	Intangible Yes	□No
	nd Address of Current Rec				10.	Name and Address of New Registere	d Agent	
			81	Name				
HESS, GEORGE F II 333 NORTH NEW RIVER DRIVE, EAST		82 Street Address (P.O. Box Number is Not Acceptable)						
SUITE 2000			83					
FORT LAUDERDALE FL 33301						105	Zip Code	
			84	City			┖┸┤	· .
11. Pursuant to the provision	ons of Sections 607.0502 and	607.1508, Florida Statutes, the	bove	-named corpor	atio	n submits this statement for the purpose	of changir	ng its registered

office or registered agent, or both, in the State of Florida. Such change was authorized by

agent. I ai	m familiar with, and accept the obligations of	, Section 607.0505, Fiori	ua Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NÖTE:	Registered Agent signature required	f when reinstating)	DATE	
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OF		
TITLE	PŤ	☐ DELETE	1.1 TITLE		Change	Addition
NAME	Berger, Delvi J		1.2 NAME			
STREET ADDRESS	2455 E SUNRISE		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33304		1.4 CITY-ST-ZIP			
TITLE	V	DELETE	2.1 TITLE		Change	☐ Addition
NAME	BERGER, ALEXANDRE C	,	2.2 NAME			
STREET ADDRESS	2455 E. SUNRISE		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33304		2. 4 CITY-ST-ZIP			FT Addition
TITLE	S	☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME	BERGER, LARA M R		3.2 NAME			
STREET ADDRESS	2455 E. SUNRISE		3.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33304		3.4. CITY-ST-ZIP			☐ Addition
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addinou
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			/ Addition
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			Maddie:
TITLE		DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRÉSS		\	6.3 STREET ADDRESS			
	1		64 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 suppliemental 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 fusite 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 or material ment with an address, with all other like empowered.

SIGNATURE:

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