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 # P96000078939

1. Corporation Name

CTANI EV HACI ER & COMPANY INC

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90097 045 ***150.00

STANLE	T HAGLER & COMPANT, IN	U.						
Principal Plac	e of Business	Mailing Address					#	
1201 JEFFERSO		1201 JEFFERSON STREET						
HOLLYWOOD FL 33019 HOLLYWOOD FL 33019								
ļ					DO NOT WRITE IN TH	IS SPACE		
					3. Date Incorporated or Qualifed 09/23/1996			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21	Light grade of the control of the co	26			NOT APPLICABLE	No	ot Applicable	
Suite, Apt. #, etc. ,		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional equired		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be		
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Count	try	8. This corporation owes the current year			
24	25	29 3	0		Personal Property Tax.		√ZNo	
<u> </u>	9. Name and Address of Current	t Registered Agent		31 Name	10. Name and Address of New Registere	d Agent		
GIEL	.ar, ian			Name				
	JEFFERSON STREET		1	32 Street Add	fress (P.O. Box Number is Not Acceptable)			
	LYWOOD FL 33019		`	33				
			ľ	93				
			8	34 City		85 Zip	Code	
		0 1007 4500 51-21-04-4-	4h a a b		poration submits this statement for the purpose		registered	
Affice or r	ragistered agent or both in the State (of Florida. Such change was autt	nonzed t	TO THE COMPORAT	tion's board of directors. I hereby accept the ap	pointment as re	gistered	
agent. 1 a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statut	es.				
SIGNATURE	Signature, typed or printed name of registered agent	4 and title 16 applicable (NOTE, P	anietared A	aent cianature reguli	red when reinstating) DATE			_
12.		D DIRECTORS	13.	gera signistare requi	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12	Ş
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 🗡

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