## 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 # P96000089812

1. Corporation Name

Principal Place of Business	Mailing Address				
6227 SW 15TH ST MIAMI FL 33144	6227 SW 15TH ST MIAMI FL 33144				
	•				
2. Principal Place of Business	2a. Mailing Address				
21	26				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	_			
22	27				

## Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90224 025 \*\*\*150.00

PHICS INC.								
								<b>618</b>   181   188
<i>',</i>	•							
e of Business	Mailing Address				1 1884881 418 18418 AVIII ABII A SĀVO BRITO			
ST	6227 SW 15TH ST							
MIAMI FL 33144 MIAMI FL 33144			DO NOT WRITE IN THIS SPACE					
	2	•				, , , , , , , , , , , , , , , , , , ,	-	
					•			
None of Business	2a Mailing Address						Ann	lied For
lace of Business	<u></u>						+ **	Applicable
# etc.								
#, 0.0	<b>⊢</b>				5. Certifcate of Status Desired			
te	City & State				6. Election Campaign Financing	\$:	5.00 N	lay Be
	28				Trust Fund Contribution	<u>`</u> A	dded to	Fees
Country	Zip	Coun	itry	_	8. This corporation owes the current year			_
25	29	30			Personal Property Tax.			□No
9. Name and Address of Curre	nt Registered Agent			-	10. Name and Address of New Register	red Agent		
		[ '	81  i	Name		•		ļ
		-	82 :	Street Addre	ss (P.O. Box Number is Not Acceptable)			
				_				
MI FL 33144		],	83			*		]
•		Į,	84 (	City		85	Zip C	ode
				•				
to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the ab-	ove-n	named corporation	ration submits this statement for the purpose's board of directors. I hereby accept the a	se of chang poointmen	ing its r t as red	egistered istered
registered agent, or both, in the State im familiar with, and accept the obliga	ations of, Section 607.0505, Flor	rida Statut	tes.	o corporation	10 000.0 0. 0.000.0 0.000, 0.000, 0.000,	,,,		
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	<u> </u>		Agent si	ignature required			ECTO	S IN 12
		_	_		ADDITIONS/CHANGES TO OFFICER			Addition
i -	□ DECE IE						ago	
SOSA, AILEC								
6227 SW 15TH ST								\
		1.3 STR	REETAL	DDRESS				}
MIAMI FL 33144		1.3 STR	REET AL Y-ST-Z			ПС	hange	Addition
MIAMI FE 33144	DELETE	1.3 STR 1.4 CIT 2.1 TITL	REET AL Y-ST-Z LE				hange	☐ Addition
	DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA	REET AL Y+ST+Z LE WE	ZIP			hange	Addition
MIAMI FE 33144		1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR	REET AL Y+ST+Z LE ME REET AL	DORESS			hange	Addition
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		1.3 STR 1.4 CIT 2.1 TITU 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITU 3.2 NAA 3.3 STR	REET AL Y-ST-Z LE ME REET AL TY-ST-Z LE ME REET AL	DDRESS DDRESS		:		
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	· · DELETE · · ·	1.3 STR 1.4 CIT 2.1 TIT 2.2 NAA 2.3 STR 2.4 CIT 3.1 TIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NA	REET AC Y-ST-Z LE ME REET AC IY-ST-Z LE REET AC YY-ST-Z LE	DDRESS ZIP			hange	Addition
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	e of Business ST 4 lace of Business #, etc. e Country 25 9 Name and Address of Curre SA, AILEC 7 SW 15TH ST MI FL 33144 to the provisions of Sections 607.05 registered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	e of Business  ST 6227 SW 15TH ST 4  MIAMI FL 33144  lace of Business  2a. Mailing Address 25  #, etc. Suite, Apt. #, etc. 27  e City & State 28  Country Zip 29  9. Name and Address of Current Registered Agent  A, AILEC 7 SW 15TH ST MI FL 33144  to the provisions of Sections 607.0502 and 607.1508, Florida Statute registered agent, or both, in the State of Florida. Such change was a m familiar with, and accept the obligations of, Section 607.0505, Florida Statute registered agent, or both, in the State of Florida. Such change was a m familiar with, and accept the obligations of, Section 607.0505, Florida Statute registered agent, or both, in the State of Florida. Such change was a m familiar with, and accept the obligations of, Section 607.0505, Florida Statute registered agent and title if applicable.  OFFICERS AND DIRECTORS  DELETE	e of Business  ST  6227 SW 15TH ST  MIAMI FL 33144  lace of Business  2a. Mailing Address 25  2b. Mailing Address 2c. Mailing	e of Business  ST 6227 SW 15TH ST MIAMI FL 33144  lace of Business  2a. Mailing Address 2b.  #, etc.  Suite, Apt. #, etc.  27  28  City & State 28  Country  Zip Country  25  9. Name and Address of Current Registered Agent  A, AILEC 7 SW 15TH ST MI FL 33144  83  84  to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-egistered agent, or both, in the State of Florida. Such change was authorized by the familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13.  D D DELETE	e of Business  ST 6227 SW 15TH ST MIAMI FL 33144  lace of Business  2a. Mailing Address 25 26  2a. Mailing Address 26  City & State  27  27  28  Country 29  30  9. Name and Address of Current Registered Agent  3A, AILEC  7 SW 15TH ST  WI FL 33144  83  84 City  to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporegistered agent, or both, in the State of Florida. Such change was authorized by the corporation familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature, typed or printed name of registered agent and little if applicable.  OFFICERS AND DIRECTORS  13.	e of Business ST 6227 SW 15TH ST MIAMI FL 33144  DO NOT WRITE IN T  3. Date Incorporated or Qualifed 10/31/1996  10/31/1996  4. FEI Number 65-0705771  Suite, Apt. #, etc.  City & State  Country  Zip Country  Zip Country  Zip Country  3. Certificate of Status Desired Trust Fund Contribution Tru	e of Business  ST 6227 SW 15TH ST MIAMI FL 33144  DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed 10/31/1996  lace of Business  2a. Mailing Address 25  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Country  Zip Country  Zip Country  Zip Country  Signam and Address of Current Registered Agent  A ALLEC  7 SW 15TH ST MI FL 33144  84  City  FL 85  Street Address (P.O. Box Number is Not Acceptable)  To the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change egistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointmen in familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  Note: Repstatered Agent is ignitiure required when reinstating)  DATE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. FEI Number  65-0705771  Section Country  Sequence of Business  4. FEI Number  65-0705771  Sequence of Status Desired  Sequence of Status Desired  Country  Sequence of Status Desired  Sequence of Seq	e of Business  ST  6227 SW 15TH ST MIAMI FL 33144  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 10/3 1/1996  lace of Business  2a. Mailing Address 2b. 65-0705771 Not  4. FEI Number Apr 65-0705771 Not  5. Certificate of Status Desired St. Fee Reg  e  City & State 2a. City & State 2b. 5. Certificate of Status Desired St. Fee Reg  e  Country  Zip  Country  Zip  Country  Zip  Country  B. This corporation owes the current year Intangible Personal Property Tax. Yes  9. Name and Address of Current Registered Agent  Name  AA, AILEC  7. SW 15TH ST  MI FL 33144  B2  Street Address (P.O. Box Number is Not Acceptable)  B4  City  FL  85  Zip C  10. Name and Address of New Registered Agent  B1  Name  AC  Country  B2  Street Address (P.O. Box Number is Not Acceptable)  B4  City  FL  85  Zip C  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 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 reg  familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  (NOTE: Registered Agent signature required when reinstating)  DATE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Change

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 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:

