Copyright Nume	PROFIT CORPORATION ANNUAL REPOR 1999		LVED, MINIMUM AMOUNT DU FLORIDA DEP Kathe Secret	R SEPTEMBER 15, 1999 TE TO REINSTATE: \$750). ARTMENT OF STATE Informe Harris Lary of State CORPORATIONS	<b>FILED</b> Jul 26, 1999 8:00 am Secretary of State 07-26-1999 90011 033 ***550.00
	DOCUMENT #		0901621		
	ASSOCIATED COM	PUSITE, INC.			
MAIL IF, 13316     SUITE 111 IF     DO NOT WRITE IN THIS SPACE       Precipied Place of Business     2n. Mailing Address all Mail Address     2n. Control Mail Mail Address     2n. Control Mail Mail Address     2n. Mail Mail Address all Address     2n. Control Mail Mail Mail Address all Address     2n. Control Mail Mail Mail Address all Address all Address all Address     2n. Control Mail Mail Mail Address all Addre	Principal Place of Business		Mailing Address		. ( <b>1011)EA</b> T STA TANKA ATEN ADTIL ADDIL ABUT ATEN ADTIL ADDIL AD
IP microgla Place of Business         Iza. Mailing Address         Applied For         Applied For           Suite, ApI, if, etc.         30         PA 15         N.N.         65         65         CP05168         Not Applied For           City & State         21         A/A         S. Cartificate of Status Desired         For Required           City & State         21         A/A         S. Cartificate of Status Desired         For Required           Zip         23         31         Country         4. Election Campeling Finnoning         S. State         Added to Fees           Zip         23         31.4 C. d. 30         Country         1. Election Campeling Finnoning         Vis         No           3. Name and Address of Current Registered Agent         USA         1. Name         Address of New Registered Agent         Vis         No           3. Name and Address of Current Registered Agent         51         Name         42         Streat Address (P.O. Box Number Is Not Acceptable)         3000 TAFT STREET         42         Streat Address (P.O. Box Number Is Not Acceptable)         43         21         Code           3000 TAFT STREET         432         Streat Address (P.O. Box Number Is Not Acceptable)         44         45         10         45         10         10         10         10<	8555 NW 64 STREET MIAMI FL 33316 US		SUITE 141 FT LAUDERDALE FL 33	3316	3. Date Incorporated or Qualified
Suite, Apt. # etc.         Suite, Apt. # etc.         S. Certificate of Status Desired         Status Desired           City & State         27         A/A         S. Certificate of Status Desired         Federated           City & State         28         City & State         S. Certificate of Status Desired         Addato frees           Zp         28         Country         29         3 3 1 4 G         S. Certificate of Status Desired         Addato frees           State         29         23         3 1 4 G         S. Certificate of Status Desired         Addato frees           State         29         23         3 1 4 G         S. Certificate of Status Desired         Addato frees           State         29         20         3 1 4 G         Status Desired         Status Desired         Addatase           State         20         23         3 1 4 G         Status Desired         Status Desired         Addatase           Status Desired         20         20         3 2 1 Country         Status Desired         Status	2. Principal Place of Business			1 14TH ST	4. FEI Number Applied For
Image: Street Address of Current Registered Agent     9. Counting the Presonal Property     Face Required       Zip     Zip     County     3 B 1 G 4     Image Presonal Property     Yes     No       Zip     Zip     County     B 1 G 4     Image Presonal Property     Yes     No       Rendelson     Address of Current Registered Agent     10. Name and Address of Current Registered Agent     11. Name     Name and Address of Current Registered Agent     11. Name     Name and Address of Current Registered Agent     12. Name and Address of Current Registered Agent     13. Name and Address of Current Registered Agent     14. Name     13. Name and Address of Current Registered Agent     14. Name     15. Name     <	1 Sùite, Apt. #, etc.	,,,		<u>v. 61 0,.</u>	S Cartificate of Status Desired \$8.75 Additional
Image: Total Fund Country     Total Fund Contribution     Added to Fares       Zip     Zip     Zip     Country     8. This corporation events lyses     Inter Fund Address of New Registered Agent       8. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       MENDELSON, VICTOR     51     Name     52     Street Address (P.O. Box Number is Not Acceptable)       3000 TAFT STREET     63     10. Name and Address (P.O. Box Number is Not Acceptable)     63       14. Purculation to provision of accept the obligations of xeed in 607 505, Florids Statutes, the above named corporation submits his statement for the purce of obligation of accept the obligation of xeed in 607 505, Florids Statutes, automoted by the corporation submits his statement for the purce of obligation of accept the obligation of xeed in 607 505, Florids Statutes, automoted by the corporation submits his statement for the purce of obligation of accept the accept the obligation of acc	2			<u></u>	5. Certificate of Status Desired Fee Required
Production         Country         Zp         Country         Zp         Stangle Personal Property         This organize Property <ththis organize="" property<="" th=""> <ththis <="" organize="" property<="" td=""><td>City &amp; State</td><td></td><td></td><td>FLORIDA</td><td></td></ththis></ththis>	City & State			FLORIDA	
	Zip	Country	Zip	Country	
MENDELSON, VICTOR 3000 TAFT STREET     81     Name       HOLLYWOOD FL 3021     82     Street Address (P.O. Box Number is Not Acceptable)       1.     Purguant to the provisions of sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of Langing its registered optics or registered agent, to obtain the State of Florida. Such change was autor to hyme corporation submits this statement for the purpose of Langing its registered agent. In the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits that statement for the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the provision statement of the purpose of Langing its registered agent. In the corporation submit its registered agent. In the corporation submit its registered agent. In the corporation submit of the purpose of Langing its registered agent. In the corporation submit of the purpose of Langing its registered agent. In the corporation submit of the purpose of Langing its registered agent. In the corporation submit of the purpose of Langing its registered agent. In the corporation submit of the purpose of Langing its registered agent. In the corporation submit of the purpose of Langing its registered agent. In the corporatis its registered agent. In the corporatis		Address of Current		30 USH	
SIGNATIONE       Expristions typed or priving have and this # spotiations       (MOTE: Regulared Agent signature required wave mentating)       DATE         2.       ************************************	11. Pursuant to the provisions office or registered agent agent. I am familiar with, 1300 - 200 - 20	of sections 607.0502 , or both, in the State of and accept the obligat	Filorida Such change was	utes, the above-named corporation	FL
International and the information supplied with this film does not quality for the exemption statutes. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If further certify that the information supplied with this film does not quality for the exemption statules. If under certify that the information supplied with this film does not qualify for the exemption statules. If under certify that the information supplied with this film does not qualify for the exemption statules. If under certify that the information are done and acrustes and acrustes and acrustes and acrustes and acrustes and the two wind acrustes and acrustes and the two wind with the statules. If under certify that the information acrustes and acrustes and acrustes and the two wind with the statules. If under certify that the information acrustes and acrustes an					
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International of 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 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 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 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	ILC. SIGNATORE Signature, typed or pri Signature, typed or pri ILC. STREET ADDRESS STREET ADDRESS STREE	RAMON 4 STREET 3316 NN, VICTOR H STREET	DIRECTORS	13.           1.1 TITLE           1.2 NAME           1.3 STREET ADDRESS           1.4 CITY-ST-ZIP           2.1 TITLE           2.2 NAME           2.3 STREET ADDRESS           2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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64 CITY-ST-ZIP 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 indicate and that my signature shall have the same legal effect as if made under oath; that I am	SIGNATORE     Signature, typed or pri       ITLE     Signature, typed or pri       ITLE     P       ITLE     PORTELLA,       STREET ADDRESS     8555 NW 6       DITY-ST-ZIP     MIAMI FL 3       ITTLE     V       MAME     MENDELSO       STREET ADDRESS     3000-TAFT-       CITY-ST-ZIP     HOLLYWOOD       ITTLE     TD       ITTLE     TD       ITTLE     TD       STREET ADDRESS     3000 TAFT       CITY-ST-ZIP     HOLLYWOOD       ITTLE     S       STREET ADDRESS     3000 TAFT       HOLLYWOOD     TITLE       STREET ADDRESS     3000 TAFT       HOLLYWOOD     AS       VETTER, JU     3000 TAFT       HOLLYWODD     STREET ADDRESS       STREET ADDRESS     3000 TAFT       HOLLYWODD     AS	RAMON 4 STREET 3316 DN, VICTOR H STREET DD FL 33021 DMAS S STREET DD FL 33021 , ELIZABETH R STREET DD FL 33021 JDITH STREET	DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	13.           1.1 TITLE           1.2 NAME           1.3 STREET ADDRESS           1.4 CITY-ST-ZIP           2.1 TITLE           2.2 NAME           2.3 STREET ADDRESS           2.4 CITY-ST-ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY-ST-ZIP           4.1 TITLE           4.2 NAME           4.3 STREET ADDRESS           3.4 CITY-ST-ZIP           4.1 TITLE           4.2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5.1 TITLE           5.2 NAME           5.3 STREET ADDRESS           5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
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	STGINATORE Signature, typed or pr I2. ITLE P PORTELLA, STREET ADDRESS STGS NW 6 MIAMI FL 3 TTLE V MENDELSO STREET ADDRESS STGS NW 6 MIAMI FL 3 TTLE V MENDELSO STREET ADDRESS STGS NW 6 IRWIN, THC	RAMON 4 STREET 3316 DN, VICTOR H STREET DD FL 33021 DMAS S STREET DD FL 33021 , ELIZABETH R STREET DD FL 33021 JDITH STREET	DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	13.           1.1 TITLE           1.2 NAME           1.3 STREET ADDRESS           1.4 CITY-ST-ZIP           2.1 TITLE           2.2 NAME           2.3 STREET ADDRESS           2.4 CITY-ST-ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY-ST-ZIP           4.1 TITLE           4.2 NAME           4.3 STREET ADDRESS           3.4 CITY-ST-ZIP           4.1 TITLE           4.2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5.1 TITLE           5.2 NAME           5.3 STREET ADDRESS           5.4 CITY-ST-ZIP           6.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
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