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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600093183

Corporation Name

May 03, 1999 8:00 am Secretary of State

05-03-1999 90063 045 ***150.00

Principal Place of Business Mailing Address 96 S. FEDERAL HIGHWAY BOCA RATON FL 33432 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/08/1996	F 11401 (0144 1111 1801
96 S. FEDERAL HIGHWAY BOCA RATON FL 33432 BOCA RATON FL 33432 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified	
BOCA RATON FL 33432 BOCA RATON FL 33432 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified	
14100/100C °	
11/00/1990	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 65-0711870	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 5.	75 Additional
22 27	e Required
	.00 May Be
	ded to Fees
Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax Yes	[74]
[24] [25] [29] [30] [4357(41.16)243, 75.	□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name	
DASILVA, JANINE	·
96 S FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable)	
POOL BATON EL COMO	
BUCA RATUN FL 33432	
84 City FL 85	Zip Code
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
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CITY-ST-ZIP 6.4 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: