**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000100256

1. Corporation Name

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90086 029 \*\*\*150.00

MICHAE	L W. MCCAULEY INC.									
Principal Place	e of Business	M	ailing Address					/#184 HWH B1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2301 S.W. 23RD CRANBROOK DRIVE 2301 S.W. 23RD CRANBROOK D BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436							DO NOT WRITE IN THIS SPACE			
								IN THIS	SPACE	<del></del>
·							3. Date Incorporated or Qualifed 12/11/1996		<del></del>	,
	I Place of Business 2a. Mailing Address						4. FEI Number			plied For
21	26						65-0713256			t Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired		\$8.75 A	ouired
22 27 City & State City & State							5 Shadan Caracian Financian			
<u> </u>							Election Campaign Financing     Trust Fund Contribution		\$5.00   Added to	
Zip	p Country Zip				,		8. This corporation owes the curren	t vear Ints		
24	25	29	30	Country			Personal Property Tax.	. ,		□No
[24]	9. Name and Address of Curre			-			10. Name and Address of New Reg	jistered /	gent	
				81	Na	me				
MICHAEL MCCAULEY					Str	eet Addre	ss (P.O. Box Number is Not Acceptable	e)		
2301 SW 23RD CRANBROOK DR					"	set Addre.	33 (1 :0: Box 14dillios) is 11013 total			
SUITE 209										
BOY	NTON BEACH FL 33436			84	City				85 Zip C	ode.
					"			FL.		
agent. I a	m familiar with, and accept the oblig  Signature, typed or printed name of registered as	ent and title	f applicable. (NOTE: Re	a Statutes	5.		ration submits this statement for the puris board of directors. I hereby accept the statement of the purish th	DATE		
TITLE	D		DELETE	1.1 TITLE	·				Change	☐ Addition
NAME	MCCAULEY, MICHAEL			1.2 NAME		- 1				
STREET ADDRESS	2301 S.W. 23RD CRANBROO	k drive		1.3 STREE	TADDR	ESS				1
CITY-ST-ZIP	<b>BOYNTON BEACH FL 33436</b>			1.4 CITY-5	ST-ZIP	1				
TITLE			C DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAME		1				
STREET ADDRESS				2.3 STREE	TADDR	ESS				ļ
- CITY-ST-ZIP			'eg'	2.4 CITY-	ST-ZIP	. ~	Company of the Company of the Company			
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NAME				3.2 NAME		1				1
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TITLE			☐ DELETE	4.1 TITLE					Change	Addition
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CITY-ST-ZIP				4.4 CITY-5	ST-ZIP	-			Chance	Naddition .
TITLÉ			☐ DELETE	5.1 TITLE		1			Change	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREE		ESS				}
- CITY-ST-ZIP				5.4 CITY-8	i I-ZIP				Chanca	Addition
TITLE			☐ DELETÉ	6.1 TITLE					Change	Addition
NAME	}			6.2 NAME						
STREET ADDRESS	1			6.3 STREE	. ≀ ADDR	200				

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.

6.4 CITY-ST-ZIP

**SIGNATURE:**