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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101778

1. Corporation Name
BYRON/DEBI, INC.



Principal Place of Business
401 FAIRWAY DRIVE
DEERFIELD BEACH FL 33434

Mailing Address
401 FAIRWAY DRIVE
DEERFIELD BEACH FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/17/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number
65-0726145

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

DAVIS, BYRON
401 FAIRWAY DRIVE
DEERFIELD BEACH FL 33434

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant 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 office or 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME DAVIS, BYRON
STREET ADDRESS 2101 W COMMERCIAL BLVD, STE 550
CITY-ST-ZIP FT LAUDERDALE FL

TITLE DS
NAME DAVIS, DEBI
STREET ADDRESS 2101 W COMMERCIAL BLVD, STE 5500
CITY-ST-ZIP FT LAUDERDALE FL

TITLE DT
NAME ROMERO, STELLA
STREET ADDRESS 2101 W COMMERCIAL BLVD, STE 5500
CITY-ST-ZIP FT LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME DAVIS, BYRON
1.3 STREET ADDRESS 401 FAIRWAY DR.
1.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33434

2.1 TITLE DS
2.2 NAME DAVIS, DEBI
2.3 STREET ADDRESS 401 FAIRWAY DR.
2.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33434

3.1 TITLE DT
3.2 NAME ROMERO, STELLA
3.3 STREET ADDRESS 401 FAIRWAY DR.
3.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33434

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
6.2 NAME
6.3 STREET ADDRESS
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:

Stella Romero
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Treas. 1-4-98 954-570-3211

CR2E034 (11/98)