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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700001329

1. Corporation Name

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90206 019 ***150.00

WILLIAM	J. MOTYCZKA, P.A.										
Principal Place	of Business	Mailing Address			•	- III	\$((\$ (0				
13410 SW 128T		13410 SW 128TH ST									
MIAMI FL 33186 MIAMI FL 33186											3
									IN THIS	SPACE	
							corporated or Q	ualifed			
						12/31					
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Nu					Applied For
21		26				65-07	<u> 26612 </u>				Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				e Codifes	ate of Status Des	ired	□ ··		5 Additional
22		27	_			5. Certifica				Fee_	Required
City & State	e	City & State				6. Election	n Campaign Fina	incing			0 May Be
23						Trust F	und Contribution			Adde	d to Fees
Zip	Country	Zip	Country	/		8. This co	rporation owes t	he currer	nt year Int		_
24	25	29	30				al Property Tax.			☐ Yes	□No
	9. Name and Address of Curr	ent Registered Agent				10. Name	and Address of	New Re	gistered	Agent	
			81	Nan	ne						
	YCZKA, WILLIAM J		82	Stro	et Addres	es (P.O. Boy	Number is Not A	Accentab	le)		
1341	0 SW 128TH ST		"	500	or Addic.	(r DOX		.coop.co	,		
MIAM	N FL 33186		83								
										105 7	ip Code
			84	City					FL	85 Z	p Code
	to the envisions of Continuo 607 Of	502 and 607 1509 Florida Statut	455				44 * 4 . 4				its registered
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office of re agent. I as SIGNATURE	onistered agent or both in the Stat	e of Florida. Such change was a gations of, Section 607.0505, Flo	uthorized by rida Statutes	tne co	orporation	when reinstating)	irectors. Thereb	y accept	DATE DATE	nunent as	
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14. 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: