FILED

Apr 30, 1999 8:00 am Secretary of State

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

	1999		DIVISION OF CORPORATIONS				1		04-30	J-1999 :	90039 ()43 ****1	50.00	,
i. Corporation	MENT # P9							,						
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Principal Plac	ce of Business	M.	ailing Address				\dashv	J		1 16011 60111	ub ill uu lli l	HANNI Ma ndi ili		
9506 SO RED ROAD 9506 SO RED ROAD														
MIAMI FL 331	56	Mi	AMI FL 33156						DC	NACT M	SITE IN T	HIS SPAC	-	
}							<u> </u>	3. Date Ir	ncorporated			HIS SPAC	<u> </u>	
1	·						1		7/1997	or Grou mo	•			
 -	Place of Business	2a.	Mailing Address		-			4. FEI Nu					App	lied For
21		26			_	. *		65-07	776116	· 				Applicable
Suite, Apt	#, etc.	27	Suite, Apt. #, etc.					5. Certifo	ate of Status	Desired		• -	. 75 Ac ee Rec	ditional
City & Sta	ite	2/1	City & State		_		- +	6 Flectio	n Campaign	Financin				May Be
23			28				1		und Contrib	-	, D		ded to	
Zip				Country					rporation ov		rrent year			3
24 25 29 30 9. Name and Address of Current Registered Agent					<u> </u>				al Property		Damina.	☐ Ye	s (2	4 44.)
 -	5. Name and Addres	ss of Current Regis	tereu Agent	8	11	Name	1	IV. Name	and Addres	S OT NOW	Register	ed Agent		
OESTERLE, DOUGLAS W														
9506 SO RED ROAD				. 82	2	Street /	Address	(P.O. Box	Number is I	Not Accep	itable)			
MIA	MI FL 33156			8:	3				·	·		 -		
				84	4	City					<u>.</u>	loci	Zin Ci	
	,			1	1	•						FL 85	Zip C	
11. Pursuant	to the provisions of Secti registered agent, or both,	ons 607.0502 and 60 in the State of Florid	07.1508, Florida Statutes a. Such change was aut	s, the above	ve-	named o	corporat	tion submit	s this statem	ent for the	e purpose	of changi	ng its n	egistered stered
agent. I a	am familiar with, and acce	pt the obligations of,	Section 607.0505, Florid	da Statute	s.	.,0 00.,00		200,2 2, 0		,	op:o op	PO11111111111	uu	5.0 .00
SIGNATURE	Signature, typed or printed name of	of registered agent and title it	applicable (NOTE: D	logistored Age	ont (6lanatura en	outrad who	en reinstating)			DATE			
12.		FICERS AND DIRE		13.		agriatore re	Aduled Mile		NS/CHANG	ES TO O			CTOR	S IN 12
TITLE	D		DELETE	1.1 TITLE		Ī	,					□ Ch		Addition
NAME	OESTERLE, DOUGL			1.2 NAME	Ξ									
STREET ADDRESS 9506 SO RED ROAD)		1.3 STREE	ETA	ADDRESS								
CITY-ST-ZIP	MIAMI FL 33156					1.4 CITY-ST-ZIP								
TITLE		v	·			2.1 TITLE						Ch	ange	Addition
NAME ARNOLD, GEORGE K. STREET ADDRESS = 9506 SO-RED-ROAD						2.2 NAME								
STREET ADDRESS - 9306 SO-NEU-HUALI CITY-ST-ZIP MIAMI FL 33156		,	2			2.3 STREET ADDRESS				-		*	-	}
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NAME				•	3.2 NAME								unge	L] Addition
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CITY-ST-ZIP					. CITY-ST-ZIP									
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STREET ADDRESS				4.3 STREET ADDRESS										ĺ
CITY-ST-ZIP				4.4 CITY-S	ST-Z	ZIP					. 			
TITLE			DELETE	5.1 TITLE		1						Ch	ange	Addition

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. 305

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

444-1980

Change

☐ Addition