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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700004604

1. Corporation Name

CLIENTEL ENTERPRISES, INC.

Principal Place of Business

Mailing Address

941 SE 7TH STREET DEERFIELD BEACH FL 33441 941 SE 7TH STREET DEERFIELD BEACH FL 33441

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90114 001 ***150.00



Suite, Apt. #, etc. 2 27 5. Certificate of Status Desired \$8.75 Additional Fee Required City & State 27 Country Zip Zip							DO NOT WRITE IN THIS SPACE			
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Zip Country Zip Country St. This corporation review the current year intangible Personal Property Tax. Yes Zho 9. Name and Address of Current Registered Agent St. Name	<u>-</u> -¬ '						, ,			
25 29 30 Personal Property Tax. Yos					Country 8. This corporation owes the current year Intangible					
9. Name and Address of Current Registered Agent MONACO, JAMES 941 SE 7TH STREET DEERFIELD BEACH FL 33441 81	24	25	├ '	30	•		· · · · · · · · · · · · · · · · · · ·			
MONACO, JAMES 941 SE 7TH STREET DEERFIELD BEACH FL 33441 83 84					T^{T}			Agent		
SHEET ADDRESS OTH STREET DEERFIELD BEACH FL 33441 13. 14. 15. 15. 15. 15. 15. 15. 15					81	Name				
SHEET ADDRESS OTH STREET DEERFIELD BEACH FL 33441 13. 14. 15. 15. 15. 15. 15. 15. 15	MONACO, JAMES									
DEERFIELD BEACH FL 33441 83					82 Street Address (P.O. Box Number is Not Acceptable)					
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. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, applications of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed directors are of impressed agent and the applicable. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS 11. TITLE OFFICERS AND DIRECTORS IN 12. 12. NAME SIGNATURE OFFICERS AND DIRECTORS 13. STREET ADDRESS 1.2 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-2P DEEFFIELD FL 33441 14. CITY-ST-2P OEEFFIELD FL 33441 14. CITY-ST-2P OEEFFIELD FL 33441 14. CITY-ST-2P TITLE OFFICERS AND DIRECTORS 3.3 STREET ADDRESS 2.2 NAME 2.2 NAME 2.2 NAME 3.3 STREET ADDRESS 3.3 STREET					83					
11. Pusuant to the provisions of Sections 607 (500) 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, Statutes, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and society the oppointment agent a					84	City		85 Z	ip Code	
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, and familiar with, applications, posed of principles agent and the if application.								11		
agent. I am familiar with , apd accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	stice or registered egent, 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.									
SIGNATURE Signature, Typed deprinted name of registance agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 MILE MONACO, JAMES SIRRET ADDRESS	agent. I ar	n familiar with, apd accept the obligat	ions of, Section 607.0505, F	lorida Stat	utes.	ne corpora	And a process of an octors. I thereby accept the appear			
Signature, typed #Frinted name of registrated Agent depended Agent signature required when remarkating)							4/9/9	9		
MONACO, JAMES 941 SE 7 ST 941	0.000	Signature, typed oprinted name of registered agent	and title if applicable. (NC	TE: Registered	Agent	signature req	uired when reinstating) DATE			
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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	CITY-ST-ZIP	415. 41. 4 41. 1. 5. 6	Late Elica de la late				Danie 440 07/200 Florida Chab 440 15 45	16 . AL =4 41-		

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:

MINIORATEDAMES EMOLIACED P