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

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # **P97000004709**1. Corporation Name

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90158 005 ***150.00 FLORIDA DEPARTMENT OF STATE **Katherine Harris**

THE FIR	EHOUSE GROUP INC.						
Principal Place	e of Rusiness	Mailing Address					{
		120 S DIXIE HWY					
120 S DIXIE HWY 120 S DIXIE HWY SUITE 201 SUITE 201							
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401					DO NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated or Qualifed		ļ
	v				01/13/1997		
Principal Place of Business 2a. Mailing Address				4. FEI Number	- A	pplied For	
26				65-0719653	N	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	·	Additional	
22			<u></u>	5, Certificate of Status Desired	Fee F	Required	
City & State City & State				6. Election Campaign Financing	•	May Be	
23					Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country	1	 This corporation owes the current year 		
24	25	29 30			Personal Property Tax.	☐ Yes	No.
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Register	d Agent	
			81	Name			1
GONZALEZ, RICARDO E JR.			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
-735-ARDMORE ROAD -							
WEST PALM BEACH FL 33401			83	17 11	6 UPLAND RD		
			84		6 UF ZAND 100	. 85 Zip	Code
				1 W		L 33	3 <i>40</i> /
office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with and accept the obligation of the state of the state and accept the obligation of the state of	EKARDO E. GON	ZALE	?z J	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap 72 Indian reinstating) Date	oointment as r	egistered
<u> </u>		ND DIRECTORS	13.	ili sigitatore requi	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
TITLE	P	DELETE	1.1 TITLE		ADDITIONAL PLANTAGES TO OFF TOLING	☐ Change	Addition
	MCKINGHT, STAN		1.2 NAME			-	_
NAME	ASS O BRUE LINERY OF HITT AND		_	T ADDRESS			
STREET ADDRESS	WEST PALM BEACH FL 33401		1.4 CITY-S	1		•	ļ
CITY-ST-ZIP		☐ DELETE	2.1 TITLE	5)-ZIF		Change	Addition
TITLE	<u> </u>		2.2 NAME				(
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STREET ADDRESS					. با المحاصلية المحال		. 1
CITY-ST-ZIP	WEST PALM BEACH FL 33401	☐ DELETE	2. 4 CITY-3 3.1 TITLE	51-ZIP		Change	Addition
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NAME	·		3.2 NAME	TADDDESS			}
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CITY-5	31-41		Change	Addition
TITLE		C Deceie					
NAME			4. 2 NAME	- 4	•		
STREET ADDRESS			4.3 STREE	TADDRESS			l l
CITY-ST-ZIP							İ
TITLE		□ DELETE	4.4 CITY-S	ST-ZIP		Change	Addition
NAME		☐ DELETE	5.1 TITLE	ST-ZIP		☐ Change	Addition
STREET ADDRESS	da .	☐ DELETE	5.1 TITLE 5.2 NAME			Change	. Addition
		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREE	T ADDRESS	. ,	Change	. ☐ Addition
CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS			
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE	T ADDRESS		☐ Change	
	Franklin Station		5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP	· .		
TITLE	t the skills of the little		5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS 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: