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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700005381

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90014 045 ***150.00

1. Corporation		***	, 11					
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Principal Place	of Business	Mailing Address			.[
2117 NW 19TH	WAY	2117 NW 19TH WAY			J			
BOCA RATON FL 33431 BOCA RATON FL 33431								
US US					DO V	OT WRITE IN THI	S SPACE	
	,				3. Date Incorporated or	Qualifed		
1					01/17/1997			
d Dringing Di	ace of Business	2a. Mailing Address			4. FEI Number		Apr	plied For
	ace of Business	— ·			65-0720865		L	Applicable
21		26			03-0120003			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status D	esired 🔲 .	\$8.75 A	
27							Fee Red	
City & State	e .	City & State		•	6. Election Campaign Fi	inancing [\$5.00	May Be 🍈
23	•	28			Trust Fund Contribution	on 🗀	Added to	o Fees
Zip	Country	Zip	Countr	y	8. This corporation owes	s the current year li	ntangible	
			30	•	Personal Property Ta		☐Yes	ĽÍNo I
24	25		301		10. Name and Address			
	9. Name and Address of Curre	nt Registered Agent	8	1 hlama	10, Name and Address	Or New Neglatered	A Agein	
0115	F16 114711441		°	Name				1
	EN, NATHAN		8:	2 Street A	ddress (P.O. Box Number is No	t Acceptable)		
2117	NW 19TH WAY		ا ا	0	30,000 (1.01.001.11.001.10.11.	,		
BOC	A RATON FL 33431		8	3				
					•	,		
	•		8.	4 City		-	85 Zip C	Code
	•			1		F		
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the abo	ve-named o	orporation submits this stateme	nt for the purpose of	of changing its	registered
11. Pursuant office or re	to the provisions of Sections 607.050 egistered agent, or both; in the State	02 and 607.1508, Florida Statute of Florida. Such change was au	s, the about thorized b	ve-named or y the corpor	orporation submits this stateme ation's board of directors. I here	nt for the purpose of	of changing its ointment as req	registered gistered
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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 truese 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: