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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000005545**1. Corporation Name

HOWARD D. ENTERPRISES, INC.

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

04-20-1999 90152 031 \*\*\*150.00

li										
Principal Place	e of Business	Mailing Addres	SS				######################################			#1881 BIN 1889
6410 S.W. 16TH STREET N LAUDERDALE FL 33068		6410 S.W. 16TH STREET N LAUDERDALE FL 33068				* . *				
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	والماعة بورايسوعيمو بدميسييرون أأم			: :		3. Date'li	corporated or Qualife			
r.			, <del>.</del>				/1997			
2. Principal P	Place of Business	2a. Mailing Ad	dress			4. FEI Nu			<del></del>	plied For
21		26				65-07	27615			t Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certifo	ate of Status Desired		\$8.75 /	Additional equired
22 City & Stat	, , , , , , , , , , , , , , , , , , , ,	City & Stat	<u> </u>			A Florio	n Campaign Financing		\$5.00	<del></del>
23	l <b>c</b>	28				<del>-</del> -	in Campaign Financing fund Contribution			to Fees
Zip	Country	Zip		Country		8. This co	orporation owes the cu	irrent year Into	angible	
24	25	29	30	<u> </u>			al Property Tax.	<del></del>	Yes	□No
	g. Name and Address of Curre	ent Registered Agen	t	<u> </u>	· · ·	10. Name	and Address of New	Registered /	Agent	
GRE	GG, DOUGLAS H			81	Name					
	S.W. 16TH STREET					ddress (P.O. Bo)	Number is Not Accep	otable)	<del>-</del> -	
N LA	AUDERDALE FL 33068			83				<del>.</del>		
				04	Cit.				85 Zip	Code
				84	,			<u>FL</u>		
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such cha	ange was autho	orized by	the corpor	orporation submi ration's board of	ts this statement for the directors. I hereby acc	e purpose of ept the appoir	changing its ntment as re	registered gistered
			, .0000, 1 ionaa	i Statutes	i.					
] -		Jano, 15 01, 50011011 001	7.0000, 1 losida	Statutes						
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable.		gistered Agen		quired when reinstating)		DATE		
SIGNATURE	Signature, typed or printed name of registered ag	pent and title if applicable.	(NOTE: Reg	jistered Agen			DNS/CHANGES TO C			
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered as OFFICERS A	pent and title if applicable.		13.					D DIRECTO	DRS IN 12
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered as OFFICERS A D GREGG, DOUGLAS H	pent and title if applicable.	(NOTE: Reg	13. 1.1 TITLE 1.2 NAME	nt signature rec					
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered as OFFICERS A D GREGG, DOUGLAS H 6410 S.W. 16TH STREET	pent and title if applicable.	(NOTE: Reg	13. 1.1 TITLE 1.2 NAME 1.3 STREET	T ADDRESS					
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered as OFFICERS A D GREGG, DOUGLAS H	pent and title if applicable.  IND DIRECTORS	(NOTE: Reg	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S	T ADDRESS				☐ Change	☐ Addition
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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 indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 argichment with an address, with all other like empowered.

SIGNATURE: