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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90067 021 ***150.00

305-655-1880

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700007567

SIGNATURE:

PATTERSON & COMPANY, P.A.

Principal Place	of Business	Mailing Address							
1031 IVES DAIR	RY ROAD	POST OFFICE BOX 4001							
STE 228, OFFIC		HOLLYWOOD FL 33083			DO NOT WRITE	IN THIS SPAC	F		
MIAMI FL 33179					3. Date Incorporated or Qualifed	111111111111111111111111111111111111111			
US					T				
	Design	2a. Mailing Address			01/27/1997 4. FEI Number		App	lied For	
2. Principal Place of Business		<u> </u>			65-0551825	-		Applicable	
21		Suite, Apt. #, etc.				\$8		dditional	
Suite, Apt. #, etc.					5. Certifcate of Status Desired	1 1 7 -	ee Rec		
22		27 City & State			6. Election Campaign Financing		5-00-7	May Be	-
City & State		28			Trust Fund Contribution	1 1	dded to	•	
Zip	Country	Zip	Coun	TV	8. This corporation owes the currer			_	
·		—	30	.,	Personal Property Tax.	∏ Ye		□No	
24	9. Name and Address of Current	Pagistared Agent	1301		10. Name and Address of New Re	gistered Agent			
	9. Name and Address of Current	Kafistalan Manit		1 Name	10. 114110 4114 , 14410 4114	<u></u>			
ΡΔΤΤ	TERSON, ANTOINETTE								
	N.W. 123RD STREET		[3	Street A	ddress (P.O. Box Number is Not Acceptab	le)			Ì
	M FL 33167			13					
MIAN	MI FL 33 107		['	33				_	
1				14 City		FL 85	Zip C	ode	
		COZ (EOD Florido Statut	oo tho ob	up pomod si	orporation submits this statement for the po		ing its (registered	1
office or re	to the provisions of Sections 607,0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	t Florida. Such change was a	utnonzea	y the corpor	ation's board of directors. I hereby accept	the appointment	t as reg	istered	
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered agent			gent signature req	uired when reinstating)	DATE	FATO	75.11.40	1
12.	OFFICERS AND		40		ADDITIONS/CHANGES TO OFFI	CERS AND DIR	ECIO	RS IN 12	⊻
12.	OTTIOLIS AIR		13.		ADDITIONO/OFFICE TO STATE			□ Addition	-
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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.

NAME OF SIGNING OFFICER OR DIRECTOR