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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000014626

1. Corporation Name

## **FILED** Mar 16, 1999 8:00 am Secretary of State 03-16-1999 90117 012 \*\*\*150.00

| 151 PUP  | 111 T, ING   |                                 |  |   |   |  |                                   |                                 |                                  |
|--|--|---------------------------------|--|---|---|--|-----------------------------------|---------------------------------|----------------------------------|
|  |  |                                 |  |   |   |  |                                   |                                 |                                  |
| Principal Place  | a of Provinces   | Mailing Address                 | <del></del>  |   |   | -  | iai <b>da</b> ini <b>da</b> ibi i | 1011 01010 01H0 1               | ( <b>818 B</b> )() 1 <b>68</b> ( |
| •  |  | <u>.</u>                        |  |   |   |  |                                   |                                 |                                  |
| 2200 ANDREWS AVENUE 2200 ANDREWS AVENUE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069                                    |  |                                 |  |   |   |  |                                   |                                 |                                  |
| TOWN AND DENOTT PE SEES  |  |                                 |  |   |   | DO NOT WRI   | TE IN THIS                        | SPACE                           |                                  |
|  |  |                                 |  |   |   | 3. Date Incorporated or Qualifed   |                                   |                                 | Ì                                |
|  |  |                                 |  |   |   | 02/14/1997   |                                   |                                 |                                  |
| 2. Principal P   | lace of Business   | 2a. Mailing Address             |  |   | •                                       | 4. FEI Number  |                                   | <u> </u>                        | olied For                        |
| 21   |  | 26                              |  |   |   | 65-0725225   |                                   |                                 | Applicable                       |
| Suite, Apt.  | #, etc.  | Suite, Apt. #, etc.             |  |   | ·                                       | 5. Certifcate of Status Desired  |                                   | \$8.75 A                        |                                  |
| 22   |  | 27                              |  |   |   |  |                                   | Fee Rec                         | <del></del>                      |
| City & Stat  | l <del>e</del>   | City & State                    |  |   |   | 6. Election Campaign Financing   |                                   | \$5.00                          |                                  |
| 23   |  | 28                              |  |   |   | Trust Fund Contribution  |                                   | Added to                        | , Fees                           |
| Zip  | Country  | Zip                             |  | untry   |   | 8. This corporation owes the curr  | ent year Inta                     |                                 | □No                              |
| 24   | 25   | [29]                            | 30   | _   |   | Personal Property Tax.   | 2                                 |                                 |                                  |
|  | 9. Name and Address of Curr  | ent Registered Agent            |  | 81  | Name                                    | 10. Name and Address of New I  | registered /                      | -tgeni                          |                                  |
| . DIDC   | ONATO IEMA :   |                                 |  | "   | (Vallie                                 |  |                                   |                                 |                                  |
| DIDONATO, JENA<br>2200 ANDREWS AVENUE  |  |                                 |  | 82  | Street Addre                            | ss (P.O. Box Number is Not Acceptable)   |                                   |                                 |                                  |
|  | IPANO BEACH FL 33069   |                                 |  |   |   |  |                                   |                                 |                                  |
| POM  | IPANU DEACH FL 33009   | •                               |  | 83  |   |  |                                   |                                 |                                  |
| ,  |  |                                 |  | 84  | City                                    |  |                                   | 85 Zip C                        | ode                              |
|  |  |                                 |  |   |   |  | FĻ                                |                                 |                                  |
| 11. Pursuant   | to the provisions of Sections 607.0  | 502 and 607.1508, Florida Stati | utes, the a  | ibove<br>d hv   | e-named corpo<br>the comoration         | ration submits this statement for the<br>n's board of directors. I hereby acce | purpose or<br>ot the appoir       | changing its i<br>itment as rec | istered                          |
| agent. I a   | registered agent, or both, in the Star<br>am familiar with, and accept the obli- | gations of, Section 607.0505, F | Iorida Stat  | tutes   |   | ,,,  |                                   |                                 |                                  |
| SIGNATURE  |  |                                 |  |   |   |  |                                   |                                 |                                  |
| SIGIVATORE   | Signature, typed or printed name of registered a                                 | <b>J</b>                        | TE: Registered   | í Agen  | t signature required                    |  | DATE                              |                                 |                                  |
| 12.  |  | AND DIRECTORS                   | 13.  |   |   | ADDITIONS/CHANGES TO OF  | FICERS AN                         | ☐ Change                        | Addition                         |
| TITLE  | PST ·  | ☐ DELETE                        | 1,1 TT   |   |   |  |                                   | ☐ Gliange                       |                                  |
| NAME   | BIEBER, GERALD   |                                 | 1.2 N  |   | ļ                                       |  |                                   |                                 | İ                                |
| STREET ADDRESS   | 27 SNOWDROP DRIVE  |                                 | 1.3 \$1  | TREET   | ADDRESS                                 |  |                                   |                                 |                                  |
| CITY-ST-ZIP  | NEW CITY NY 10956  |                                 |  | ITY∙S   | T-ZIP                                   |  | <del></del>                       | Change                          | Addition                         |
| TITLE  | 1  | ☐ DELETE                        | 2.1 Π  | TLE.  |   |  |                                   |                                 |                                  |
| NAME   |  |                                 | 22 N   |   | I .                                     |  |                                   | Containge                       |                                  |
| STREET ADDRESS   | :  |                                 | 2.2 N  | AME   |   |  |                                   | onunge                          | Addition                         |
| CITY-ST-ZIP  |  |                                 |  |   | T ADDRESS                               |  |                                   | C) Ortaligo                     |                                  |
| TITLE  |  |                                 | 2.3 ST<br>2.4 C  | TREET   |   |  |                                   |                                 | _                                |
|  |  | ☐ DELETE                        | 2.3 \$   | TREET   |   |  | · <del>-</del>                    | Change                          | Addison                          |
| NAME   |  | ☐ DELETE                        | 2.3 ST<br>2.4 C  | TREET<br>CITY-S   |   |  |                                   |                                 | _                                |
| NAME<br>STREET ADDRESS   |  | ☐ DELETE                        | 2.3 S <sup>1</sup><br>2.4 C<br>3.1 TI<br>3.2 N   | TREET<br>CITY-S<br>ITLE<br>IAME   |   |  |                                   |                                 | _                                |
|  |  |                                 | 2.3 ST<br>2.4 C<br>3.1 TI<br>3.2 N<br>3.3 ST<br>3.4. C   | TREET CITY-S ITLE LAME TREET CITY-S   | T-ZIP                                   |  |                                   | ☐ Change                        | ☐ Add®ion                        |
| STREET ADDRESS   |  | ☐ DELETE                        | 2.3 ST<br>2.4 C<br>3.1 TI<br>3.2 No<br>3.3 ST  | TREET CITY-S ITLE LAME TREET CITY-S   | T-ZIP                                   |  |                                   |                                 | _                                |
| STREET ADDRESS   |  |                                 | 23 S' 2.4 C 3.1 TI 3.2 No 3.3 S' 3.4. C 4.1 TI   | TREET CITY-S ITLE LAME TREET CITY-S   | T-ZIP                                   |  |                                   | ☐ Change                        | ☐ Add®ion                        |
| STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE   |  |                                 | 23 S' 2.4 C 3.1 TI 3.2 N 3.3 S' 3.4. C 4.1 TI 4.2 N  | TREET CITY-S TREET TREET CITY-S TILE VAME   | T-ZIP                                   |  |                                   | ☐ Change                        | ☐ Add®ion                        |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME  |  | ☐ DELETE                        | 2.3 ST 2.4 C 3.1 TI 3.2 N 3.3 ST 3.4 C 4.1 TI 4.2 N 4.3 ST 4.4 C I   | TREET CITY-S TILE TREET CITY-S TILE NAME TREET  | T ADDRESS T ADDRESS                     |  |                                   | ☐ Change                        | Addition                         |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   |  |                                 | 2.3 S <sup>1</sup> 2.4 C 3.1 TI 3.2 N 3.3 S <sup>1</sup> 3.4. C 4.1 TI 4.2 N 4.3 S <sup>1</sup> 4.4 CI 5.1 TI  | TREET CITY-S TILE TREET CITY-S TILE TREET CITY-S TILE TREET   | T ADDRESS T ADDRESS                     |  |                                   | ☐ Change                        | ☐ Add®ion                        |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ☐ DELETE                        | 2.3 ST 2.4 C 3.1 TI 3.2 N 3.3 ST 3.4 C 4.1 TI 4.2 N 4.3 ST 4.4 C 5.1 TI 5.2 N  | TREET THE THE TREET THE TREET THE TREET THE TREET THE TREET THE THE THE THE THE THE THE THE THE   | T ADDRESS T ADDRESS T ADDRESS T ADDRESS |  |                                   | ☐ Change                        | Addition                         |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   |  | ☐ DELETE                        | 2.3 S' 2.4 C 3.1 TI 3.2 N 3.3 S' 3.4 C 4.1 TI 4.2 N 4.3 S' 4.4 CI 5.1 TI 5.2 N 5.3 S'  | TREET THE TAME TREET THE TREET THE TREET THE TREET THE TREET THE TREET TREET  | T ADDRESS T ADDRESS T ADDRESS T ADDRESS |  |                                   | ☐ Change                        | Addition                         |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  |  | ☐ DELETE                        | 2.3 ST 2.4 C 3.1 TI 3.2 NJ 3.3 ST 3.4 C 4.1 TI 4.2 NJ 4.3 ST 4.4 C 5.1 TI 5.2 NJ 5.3 ST 5.4 C 5.4 C 5.4 C 5.4 C 5.4 C 5.5 TI 5.2 NJ 5.3 ST 5.4 C 5.4 C   | TREET | T ADDRESS T ADDRESS T ADDRESS T ADDRESS |  |                                   | ☐ Change                        | Addition Addition                |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                               |  | ☐ DELETE                        | 2.3 ST 2.4 C 3.1 TI 3.2 Nu 3.3 ST 3.4 C 4.1 TI 4.2 Nu 4.3 ST 4.4 C 5.5 TI 5.2 Nu 5.3 ST 5.4 C 6.1 TI 5.2 Nu 6.1 TI | TREET TILE TREET TAME TREET TAME TREET TILE TREET TILE TILE TILE TILE TILE TILE TILE T  | T ADDRESS T ADDRESS T ADDRESS T ADDRESS |  |                                   | ☐ Change                        | Addition                         |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                   |  | ☐ DELETE                        | 2.3 ST 2.4 C 3.1 TI 3.2 NJ 3.3 ST 3.4 C 4.1 TI 4.2 NJ 4.3 ST 4.4 C 5.1 TI 5.2 NJ 5.3 ST 5.4 C 5.4 C 5.4 C 5.4 C 5.4 C 5.5 TI 5.2 NJ 5.3 ST 5.4 C 5.4 C   | TREET TILE TREET TAME TREET TAME TREET TILE TREET TILE TILE TILE TILE TILE TILE TILE T  | T ADDRESS T ADDRESS T ADDRESS T ADDRESS |  |                                   | ☐ Change                        | Addition Addition                |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE |  | ☐ DELETE                        | 2.3 ST 2.4 C 3.1 TI 3.2 Nu 3.3 ST 3.4 C 4.1 TI 4.2 Nu 4.3 ST 4.4 C 5.1 TI 5.2 Nu 5.3 ST 5.4 C 6.1 TI 6.2 Nu | TREET THE THE TREET THE TREET THE TREET THE TREET THE TREET THE TREET THE THE TREET THE TREET THE TREET THE TREET THE TREET THE TREET THE THE TREET THE TREET THE TREET THE TREET THE TREET THE TREET THE THE TREET THE TREET THE TREET THE THE TREET THE THE TREET THE TREET THE TREET THE TREET THE THE TREET THE TREET THE THE TREET THE THE THE THE THE THE THE THE THE             | T ADDRESS T ADDRESS T ADDRESS T ADDRESS |  |                                   | ☐ Change                        | Addition Addition                |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR