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

Mailing Address

PROFIT: **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90017 029 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000014952

Principal Place of Business

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

EASTERN DEVELOPMENT, INC.

1330 S.E. 4TH SUITE I		1330 S.E. 4TH AVENUE SUITE I	SUITE I			. DO NOT MOTE IN	THO 0040E	••	
FORT LAUDER	DALE FL 33316	FORT LAUDERDALE FL 333	316			DO NOT WRITE IN 3. Date Incorporated or Qualifed 02/13/1997	THIS SPACE	^	
Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap!	plied For	
21		26	26			65-0733321	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75 △	dditional	
22	·	27	27			5. Certificate of Status Desired	Fee Re	quired	
City & Stat	e	City & State	City & State			6. Election Campaign Financing	\$5.00	Mav Be	
23		28				Trust Fund Contribution	•	- 1	
Zip	Country	Zip	Cot	untry		8. This corporation owes the current ye	ear Intangible		
24	25	29	30			Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regis	lered Agent		
				81 N	ame	•	*		
	POULOS, DIANE E			82 Street Add		(P.O. Boy Number is Not Acceptable)			
2000	S OCEAN DR #1608		62			(Address (F.O. Dox Number is Not Acceptable)			
FT (AUDERDALE FL 33316			83	3. Date Incorporated or Qualifed 02/13/1997 4. FEI Number 65-0733321 5. Certifcate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 85 Zlp Code City FL 85 Zlp Code				
				84 C	ity	सिंगिक पात्र करे के पर तरकार है हैं। नाम सिंग्रा	85 Zip C	Code	
<u></u>				1			FL	i-to rod	
office or i agent. I a SIGNATURE	egistered agent, or both, in the State of imfarrial with, and accept the obligation of the obligation	nes 1	DiAN	ડ∈	Flior	powiss	9-11 <u> </u>		
12.	OFFICERS AND		13.				RS AND DIRECTO	RS IN 12	
TITLE	PD	☐ DELETE	1.1 T	TTLE		U\$400.8110.21	☐ Change	☐ Addition	
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CITY-ST-ZIP	FT LAUDERDALE FL 33316		1.3 S	TREET ADD	NEGO J			i	
TITLE				STREET ADO	Ì		,		
NAME	l VD	☐ DELETE		CITY-ST-ZIF	Ì		Change	Addition	
STREET ADDRESS	'-	☐ DELETE	1.4 C 2.1 T	CITY-ST-ZIF	Ì		Change	Addition	
	NEYRA, PATRICIA A	☐ DELETE	1.4 C 2.1 T 2.2 N	CITY-ST-ZIF	,		Change	☐ Addition	
	NEYRA, PATRICIA A 2000 S OCEAN DR #1608	☐ DELETE	1.4 C 2.1 T 2.2 N 2.3 S	CITY-ST-ZIF TITLE VAME STREET ADO	ORESS		Change	☐ Addition	
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6.2 NAME

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 emplowered 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 of an allochment with an address, with all other like empowered.

6.4 CITY-ST-ZIP