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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000016103

1. Corporation Name

OZ BALLOON COMPANY

Principal Place of Business

Mailing Address

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90014 018 \*\*\*158.75



339 N W 72ND STREET 1252 S.W. FIRST WAY OAKLAND PARK FL 33309 DEERFIELD BEACH FL 33441 US				DO NOT WRITE IN TH	IS SPACE		
03				3. Date Incorporated or Qualifed 02/17/1997			
2. Principal Place of Business 21 339 NW 32 Nol Street 26 339 NW 32 Nol Suite, Apt. #, etc.  Suite, Apt. #, etc.				4. FEI Number 650841980 APPLIED FOR	Not	olied For Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>\$8.75</b> A Fee Red		
City & Stell	and Park FL	20 0 0	Park FL	6: Election Campaign Financing Trust Fund Contribution	\$5.00 Added to		
Zip 24 3330	Country 25 1/5/A	29 3330 9 30	Country VSA	This corporation owes the current year leading Personal Property Tax.	<b>∑</b> Yes	□No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
81 Name GRANDER OSWALD							
GRANDER, OSWALD				81 Name GRANDER OSWILD  82 Street Address (P.O. Box Number is Not Acceptable)  339 NW 32 new 5 Treet			
1252 S.W. FIRST WAY				39 NW 32 not STUCK	97		
DEE	RFIELD BEACH FL 33441		83				
}			84 City	- 15 1 -	85 Zip C	ode o	
}			1 Ca	Klond Park F			
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statutes,	the above-named cor	poration submits this statement for the purpose	of changing its	registered	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.							
Elian William of acceptable							
SIGNATURE	Signiture, typed or printed name of registered agent a	and title if applicable. (NOTE; Re	gistered Agent signature requir				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS			
TITLE	<b>P</b>	☐ DELETE	1.1 TITLE		· Change	☐ Addition	
NAME	Grander, Oswald		1.2 NAME			(	
STREET ADDRESS	334 N W 32ND STREET		1.3 STREET ADDRESS			1	
CITY-ST-ZIP	OAKLAND PARK FL 333 <u>09</u>		1.4 C/TY-ST-Z/P				
TITLE		☐ DELETE	2.1 TITLE		Change	☐ Addition	
NAME			2.2 NAME				
STREET ADDRESS	_		2.3 STREET ADDRESS	•		l	
CITY-ST-ZIP		<u> </u>	2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition }	
NAME			3.2 NAME			ı	
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY- ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition	
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET ADORESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLÉ		☐ Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS			]	
CITY-ST-ZIP			5.4 CITY- ST-ZIP				
TITLE		DELETE	6.1 TITLE		Change	☐ Addition	
NAME		<u> </u>	6.2 NAME		-	1	
}	1		6.3 STREET ADDRESS				
STREET ADDRESS		•	6.4 CITY-ST-ZIP				
CITY_ST_ZID	i e e e e e e e e e e e e e e e e e e e		■ 0.4 OH 1.0 1.4 m			ſ	

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 appears with all other like empowered.

SIGNATURE: