**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000019222

Corporation Name

HAR DETOLICA INC

## Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90085 036 \*\*\*150.00

JIM PEIF	NOSA, INC.				ľ					
Principal Place	of Business	Mailing Address				1 1501(99) (10	IDILE IDECE DECEN	pur aglil Buiði		13818 1181 3881
1407 SW 1ST W	•	1407 SW 1ST WAY			İ					
DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 3344			I				DO NOT.WR	ITE IN THIS	SPACE	
						3. Date Incorporate				
					ļ	02/24/1997			_	
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Ar	plied For
21		26				65-0741844			<del></del> _	t Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Sta	itus Desired		•	Additional
22		27		***						equired
City & State	9. ***	City & State				6. Election Campa				May Be
23		28				Trust Fund Con				to Fees
Zip	Country	Zip	Country	1		This corporation     Personal Prope		rent year in	tangible □ Yes	□No
24	25		30			10. Name and Add		Registered		
<del></del>	9. Name and Address of Curren	it vedistelen Ağelit	81	Nam	 B	IV. Itamie aliu Auu				
PETR	RUSA, JAMES J									
	SW 1ST WAY		82	Stree	t Addres	ss (P.O. Box Number	is Not Accept	able)		ļ
	RFIELD BEACH FL 33441		83	1	,					
- CLL		•	55							
			84	City	-			FL	85 Zip	Code
										registered
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office or re agent. Lar	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was au ations of, Section 607.0505, Flori	itnonzed by ida Statutes	the cor s.	poration	is board of directors.	tement for the	pr uie appo	r changing its intment as re	gistered
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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 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 op an attachment with an address, with all other like empowered.

SIGNATURE: