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 # P97000021445

AMERICA'S ATTIC, INC

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90141 007 ***150.00



					ł	. 1185	######################################			
Principal	Place of Business				ı			()) (()) (()) (()		<u> </u>
		Mailing Address				1 (11)	194901 1961 1991 1981 1981 1	YAK Ba har ab ahi ab	# #	81811 BJBB1 B111 IBB1
14200 SW 67TH AVE. MIAMI FL 14200 SW 67TH AVE. MIAMI FL										
!					1		DO NOT V	VRITE IN TH	IS SPACE	
					Γ	3. Date Inco	rporated or Qualit	fed		
2. Princip	al Place of Business	2a Mailing Add				03/07/1				
21		2a. Mailing Address				4. FEI Numb			$\neg \neg \neg$	Applied For
Suite, A	Apt. #, etc.	Suite, Apt. #, etc.				<u>65-0823</u>	3334		<u> </u>	Not Applicable
22		27			1	5. Certificate	of Status Desired	. [7]	\$8.7	5 Additional
City & State		City & State								Required
23		28			[]	Election C	ampaign Financir	ng . 🗀	\$5.0	00 May Be
Zip	Country	Zip	Coun	trv			d Contribution	"; []	Adde	ed to Fees
24				30			oration owes the c	urrent year In	ntangible	
	Name and Address of Curren	t Registered Agent	1301 <u>—</u>			Personal P	Property Tax.	<u> </u>	☐ Yes	□No
G				II Nam		u. Name and	d Address of Nev	w Registered	Agent	
	ALEGO, ALLEN			_L						
601 BRICKELL KEY DR				2 Stree	t Address	(P.O. Box Nu	mber is Not Acce	ptable)		
SUITE 805				3				· · · · · · · · · · · · · · · · · · ·		
MIAMI FL 33131				٦						
			8						85 Zir	- 0-4-
11. Pursua	nt to the provisions of Sections 607.0502 r registered agent, or both, in the State of am familiar with, and accept the obligati	and 607.1508. Florida Statu	too the she					FL	, i	Code
agent, I	registered agent, or both, in the State of am familiar with, and accept the obligati	f Florida. Such change was a	ies, ine abo authorized b	ve-named v the con	i corporation poration's h	on submits this	s statement for th	e purpose of	changing i	ts registered
SIGNATUR	· J	ons of, Section 607.0505, Fig	orida Statute	S.		Journ of milect	iors. I nereby acc	ept the appoi	ntment as r	registered
	Signature, typed or printed name of registered agent	and title if applicable			_					
12.	OFFICERS AND	DIRECTORS (NOTE	: Registered Age	ent signature				DATE		 [
TITLE	PD ——	☐ DELETE	1.1 IIILE		т	ADDITIONS/	CHANGES TO O	FFICERS AN	D DIRECT	ORS IN 12
IAME	SCARFONE, JOSEPH				ĺ				☐ Change	☐ Addition
TREET ADDRES	601 BRICKELL KEY DR., SUITE	805	1.2 NAME		ĺ					
ITY-ST-ZIP	MIAMI FL 33131			TADORESS	ľ					
ITLE	VP D	☐ DELETE	1.4 CITY- 8	T-ZIP	<u> </u>					ľ
ame	BERG, JOHN A		2.1 TITLE						☐ Change	Addition
TREET ADDRESS	601 BRICKELL KEY DR., SUITE	305	2.2 NAME							ļ
TY-ST-ZIP	-MIAMI FL 33131			TADDRESS		•				J
TLE	TD	DELETE	2:4 CITY-5	IT-ZIP					-=	-
WE	BERG, MARY PAT	المال	3.1 TITLE	ŀ					Change	Addition
REET ADDRESS		105	3.2 NAME	ļ						Į
TY-ST-ZJP	MIAMI FL 33131		3.3 STREET	1						
TLE	S D	☐ DELETE	3.4. CITY-S	T-ZJP						1
ME	ALEXANDER, JESSIE	DEELIE	4.1 TITLE						Change	Addition
REET ADDRESS	***	በፍ	4. 2 NAME	ļ						_]
Y-ST-ZIP	MIAMI FL 33131	00	4.3 STREET							[
LE	\$	DELETE	4.4 CITY-ST	-ZIP						ĺ
ME	ALLEN, ROBERT N JR	□ nere i.e	5.1 TITLE	ſ				[☐ Change	Addition
REET ADDRESS	601 BRICKELL KEY DR., SUITE 80	าร	5.2 NAME			*			-	
Y-ST-ZIP	MIAMI FL 33131		5.3 STREET							
E		☐ DELETE	5.4 CITY-ST-	ZIP						
Æ ¦		∴ neτε ι ε	6.1 TITLE	,					Change	Addition
EET ADDRESS			6.2 NAME	_					ŭ	
-ST-ZIP			6.3 STREET A							[
	ertify that the information supplied with th	in filling d	6.4 CITY-ST-	ZIP .						1

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 effect 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 attactiment with an address, with all other like empowered.

IGNATURE:

R OR DIRECTOR