## 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

1. Corporation Name

Principal Place of Business	Mailing Address		
00 e. Broward Blvd Suite 608 T. Lauderdale fl 33301	800 E. BROWARD BLVD SUITE 608 FT. LAUDERDALE FL 39301		
	2a. Mailing Address		

**FILED** Jan 25, 1999 8:00am **Secretary of State** 

01-25-1999 90030 031 \*\*\*150.00



FT. LAUDERDAL	ALE FL 33301 FI. LAUDERDALE FL 53301			DO NOT WRITE IN THIS SPACE			
	•			3. Date Incorporated or Qualifed			
	,			03/10/1997			
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
2. Timospai Fi		26		65-0738709	Not Applicable		
Suite, Apt. i	#. etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	\$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & State	3	City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution	Added to Fees		
Zip	. Country	Zip	Country	8. This corporation owes the current year Inta-	ngible ·		
24	25	29 3	30	reisonal Floperty Tax.	Yes No		
	9. Name and Address of Current			10. Name and Address of New Registered A	gent		
		A 44 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	81 Name				
	NSON, HUGH	The state of the s	82 Street Add	iress (P.O. Box Number is Not Acceptable)			
800 E BROWARD BLVD., SUITE 608							
FT. L	AUDERDALE FL 33301		83		公路延續欄間 1.		
	* .		84 City	15 75 75 1 1 1 1 1 2 2 2 3 3 5 2 3 3 4 1 7 1 1 5 2 7 1 1 2 4 4 4 5 5 5 5 1 5 4 1 5 1 5 1 5 1 5 1 5	85 Zip Code		
			1 - 1	<u> </u>			
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							
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hamed corporation sublinishing statement for the paper of the appointment as 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.							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Agent signature requir	red when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	Р	☐ DELETE	1.1 TITLE	and the state of t	☐ Change ☐ Addition		
NAME .	JOHNSON, HUGH		1.2 NAME				
STREET ADDRESS	800 E. BROWARD BLVD., SUITE	608	1.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		1.4 CITY-ST-ZIP		Constant Control		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition		
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
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		_	5.2 NAME				
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NAME	artitalian Abritis en Gi	•	6.3 STREET ADDRESS	•	٠.,		
STREET ADDRESS			4.) OTREET PODITEOU				

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. CITY-ST-ZIP

SIGNATURE: