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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000023 113

## FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90077 025 \*\*\*150.00

	HOLDINGS INC.									
Principal Plac	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		1 1961(991 149 16111 11	INII ANKII ANÍRI M	<b>4</b> 314 <b>44</b> 14 <b>6</b> 411	14 <b>0</b>		
22575 ESPLAN		22575 ESPLANADA CIR	ì							
BOCA RATON		BOCA RATON FL 3343	- · · · · · · · · · · · · · · · · · · ·							
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					. Date Incorporated or 03/13/1997	Qualifed		<del></del>		
2. Principal P	lace of Business	2a. Mailing Address			FEI Number			A	polied For	
21 160	W. Camino Real	26 160 W	. Camino Re	al _	<u>65-0781373</u>				ot Applicable	]
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		I .	Certifcate of Status D	esired [	٦		Additional	
22	331	27 26	<u> </u>						equired	
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23	BOCA RATON Fla.	28 BOCA RI			Trust Fund Contribut				to Fees	ł
Zip	Country	Zip	Country	8	This corporation owe				Пы	
24 33L		29 33432	30 U.S. P		Personal Property Ta			Yes	□No	ł
	9. Name and Address of Current	Registered Agent			Name and Address	of New Regi	isterea A	gent	······	
005	MODETON CEDITICE COMPANY		81 Nar	ne						ļ
	RPORATION SERVICE COMPANY		82 Stre	et Address (l	P.O. Box Number is No	t Acceptable	)			
	HAYS STREET									┨
IAL	LAHASSEE FL 32301-2525		83							
			84 City					<b>85</b> Zip	Code	1
							<u>FĻ</u>			
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of familiar with, and accept the obligation	f Florida⊺Such change wa	as authorized by the c	ed corporation's b	on submits this stateme loard of directors. I her	eby accept th	pose oi c ne appoint	manging it tment as r	egistered	
		(								1
SIGNATURE		<u> </u>					DATE		<del></del>	ــ ا
	Signature, typed or printed name of registered agent a		OTE: Registered Agent signat				DATE	DIRECTI	ORS IN 12	á
12.	Signature, typed or printed name of registered agent a OFFICERS AND	DIRECTORS	13.		reinstating) ADDITIONS/CHANGE			DIRECT	ORS IN 12	11/08)
12.	Signature, typed or printed name of registered egent of OFFICERS AND		13. 1.1 TITLE		ADDITIONS/CHANGE	S TO OFFIC	ERS AND		ORS IN 12	(41/08)
12. TITLE NAME	Signature, typed or printed name of registered agent a OFFICERS AND D CORRIGAN, DOUGLAS	DIRECTORS	13. 1.1 TITLE 1.2 NAME		ADDITIONS/CHANGE	S TO OFFIC	ERS AND	Change	ORS IN 12	11/08/
12. TITLE NAME STREET ADDRESS	OFFICERS AND  OFFICERS AND  CORRIGAN, DOUGLAS  22575 ESPLANADA CIR	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORE	ss 160 '	ADDITIONS/CHANGE	S TO OFFIC	ERS AND	Change	ORS IN 12	22E034 (11/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent a OFFICERS AND D CORRIGAN, DOUGLAS	DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRI 1.4 CITY-ST-ZIP	ss 160 '	ADDITIONS/CHANGE	S TO OFFIC	ERS AND	Change	ORS IN 12 Addition	CD2E034 (11/08)
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_