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

्र⊋ROFIT . CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE .

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90022 047 ***150.00

DOCUMENT #	P97000025054
DOODINE! !!	アタノいいいひとのいつ4

1. Corporation Name

A TO Z	ANTIQUES, INC.								
Principal Place	e of Business	Mailing Address			. 3	- 1 IODAIADH IIÊ ARIN İEDIŞ ERIN ORUN ÖĞIN Ö		ELAN ANKI AİĞI (AA)	7
11 N. FEDERAL	HICHWAY	C/O BERT M. BORNHOEFT				}			
	DANIA FL-33004 1000 QUAYSIDE TERRACE APT 812			DO MOTAMBITE IN THE COACE					
	MIAMI FL 33138			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed			
2 84 4 1 8	, , , , , , , , , , , , , , , , , , ,	20 Mailing Address				03/17/1997 4. FEI Number		Applied For	1
	lace of Business	2a. Mailing Address				1		Not Applicable	1
21 4 8 0 2 Suite, Apt.	3 SM JJHD AVE	Suite, Apt. #, etc.				65-0755670	\$8.7	5 Additional	1
22	r, etc.	27				5. Certifcate of Status Desired		Required	
City & Stat		City & State				6. Election Campaign Financing	\$5.0	00 May Be	1
23 MUP		28				Trust Fund Contribution		ed to Fees]
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year	Intangible]
24 331S	5 25 MIAMI DAD	<u>r_ 29</u>	30			Personal Property Tax.	Yes	□No	
	9. Name and Address of Curren					10. Name and Address of New Register	ed Agent		1
				81 N	Vame				1
	NHOEFT, BERT M			82 5	Street Addre	ss (P.O. Box Number is Not Acceptable)			1
	I. FEDERAL HIGHWAY				000	QUAYSIDE TER	15 B	21815	
DAN	IA-FL 33004			83					
				84 (City		85 Z	ip Code	1
				1	TIPH	C 1	5 ∟ ع	7138_	
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statute	s, the a	hove n	amed corno	ration submits this statement for the numose	of changing	its registered .	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was au itions of, Section 607.0505, Flori	tnonzet da Stat	utes.	e corporation	n's board of directors. I hereby accept the ap	pomiment at	registered	
SIGNATURE									}
	Signature, typed or printed name of registered ager				gnature required	when reinstating) DATE		TODO (1) 40	- 6
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	Chan		;
TITLE	PTD	☐ DELETE	1.1 TI				□ C≀laii	geAddition	
NAME	BORNHOEFT, BERT M		1.2 N			·			8
STREET ADDRESS	1000 QUAYSIDE TERR APT 81	2	1	TREET AD					l c
CITY-ST-ZIP	MIAMI FL 33138			TY-ST-ZI	P		Chan	ge Addition	1 8
TITLE		☐ DELETE	2.1 Tr					ge	ĺ
NAME			2.2 N						
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ÇITY-ST-ZIP			2.4 C	ATY-ST-Z					
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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:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR