## 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

## **FILED** Feb 18, 1999 8:00am **Secretary of State**

1000				02-18-1999 90008 037 ****150.00	
MENT # P9700	0026259				
D. DAIELLO, P.A.					nii sania ilaia aniia ilaal allia isii laal
of Business	Mailing Address				4
4800 N. FEDERAL HWY. 4800 N. FEDERAL HWY.					43, 12, 24
SUITE 307-B SUITE 307-B			DO NOT WRITE I	THIS SPACE	
L 33431	DOOM INTO IT IS SO TO			3. Date Incorporated or Qualifed	+ 1, 1 + H-1
					A-vied For
Principal Place of Business     2a, Mailing Address					Applied For Not Applicable
21 26 Suite Ant # etc					\$8.75 Additional
Suite, Apt. #, etc.				5. Certifcate of Status Desired	Fee Required
				6. Election Campaign Financing	\$5.00 May Be
City & State  City & State  28				Trust Fund Contribution	Added to Fees
Country	Zip	_ `			year Intangible ☐ Yes ☐ No
25	127	0	<del>.</del> .	Personal Property Tax.	
9. Name and Address of Cur	rrent Registered Agent	81	Name	10. Name the Address of the	
TLO. THOMAS D	3		01 144	(D.O. Boy Number is Not Acceptable	
4800 N. FEDERAL HWY.			Street Addr	ress (P.O. Box Number is Not Acceptable	100 100 100 100 100 100 100 100 100 100
SUITE 307-B		83			
BOCA RATON FL 33431			City	\$4.500 d.26 g. 18.500 g. 42.50 M. E.	85 Zio Code
	·	1 -	- 1	A E Abo au	FL popular its registered
to the provisions of Sections 607.	0502 and 607.1508, Florida Statutes	s, the above thorized by	e-named corp the corporation	on's board of directors. I hereby accept the	e appointment as registered
m familiar with, and accept the ob	oligations of, Section 607.0505, Florid	da Statutes	<b>5.</b>		
	Accept and title if applicable (NOTE: F	Registered Age	nt signature require	ad when reinstating)	DATE
Signature, typed or printed name of registered OFFICERS	1 agont and the trapper	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12  Change Addition
DPST	☐ DELETE	1.1 TITLE	İ	\$1.679.4740	Charge ( Addition
STREET ADDRESS 4800 N FEDERAL HWY., SUITE 307-B		1.2 NAME	ļ		
BOCA RATON FL 33431	T OF LETE		ST-ZIP		☐ Change ☐ Addition
	□ nereic				,
		1			
		2.4 CITY-	31-ZiP		
	☐ DELETE	2.4 CITY- 3.1 TITLE			☐ Change ☐ Addition
	☐ DELETE				Change Addition
	☐ OELETE	3.1 TITLE 3.2 NAME		· 接法 · 经销售证据	□ Change □ Addition
		3.1 TITLE 3.2 NAME 3.3 STREI 3.4. CITY-	ET ADORESS ST-ZIP		
	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY- 4.1 TITLE	ET ADDRESS ST-ZIP		Change Addition
		3.1 TITLE 3.2 NAME 3.3 STREI 3.4. CITY- 4.1 TITLE 4. 2 NAME	ET ADDRESS ST-ZIP		
		3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY- 4.1 TITLE 4. 2 NAME 4.3 STRE	ET ADDRESS ST-ZIP E		
	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		
		3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY- 4.1 TITLE 4. 2 NAME 4.3 STRE	ET ADDRESS ST-ZIP		☐ Change : ☐ Addition
5	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREI 3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP		☐ Change : ☐ Addition
	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREI 3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP		☐ Change : ☐ Addition
	Country  25  9. Name and Address of Cur  ELLO, THOMAS D  N. FEDERAL HWY.  E 307-B  A RATON FL 33431  to the provisions of Sections 607 egistered agent, or both, in the Signature, typed or printed name of registered  OFFICERS  DPST  DAIELL, THOMAS D	D. DAIELLO, P.A.  of Business  Mailing Address 4800 N. FEDERAL HWY. SUITE 307-B BOCA RATON FL 33431  ace of Business  2a. Mailing Address 2b. H. etc.  2a. Mailing Address 2c. Suite, Apt. #, etc. 27  City & State 28  Country 25  9. Name and Address of Current Registered Agent  ELO, THOMAS D D. FEDERAL HWY. E 307-B ARATON FL 33431  to the provisions of Sections 607.0502 and 607.1508, Florida Statutes egistered agent, or both, in the State of Florida. Such change was au m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes of Florida. Such change was au m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes of Florida. Such change was au m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes of Florida. Such change was au m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes of Florida. Such change was au m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, Section 607.0505, Florida	MENT # P9700026259  D. DAIELLO, P.A.  of Business Mailing Address 4800 N. FEDERAL HWY. SUITE 307-8 BOCA RATON FL 33431  ace of Business  2a. Mailing Address 2b. City & State 2c. Country 2c. City & State 2c. Country 2c. City & State 2c. Country 2c. City & State 2c. Country 2c. City & State 2c. City & State 2c. Country 2c.	MENT # P97000026259  D. DAIELLO, P.A.  Mailing Address  M	NENT # P97000026259  D. DAIELLO, P.A.  Mailing Address AL HWY.  4800 N. FEDERAL HWY. SUITE 3078 BOCA RATON FL 33431  DO NOT WRITE IN  3. Date Incorporated or Qualifed 03/25/1997 A. FEI Number 65-0750347  5. Certificate of Status Desired G. Election Campaign Financing Trust Fund Contribution  Country 2

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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS