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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000026589

ECRMIDARI E INIVESTMENT CO INC

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90050 008 ***150.00

FORMU	MOLE INVESTIMENT CO. INC	<i>)</i> •)
Principal Plac	of Business	BA-III- A Add		<u> </u>		
•	A	Mailing Address		l	•	
941 39TH COURT 941 39TH COURT WEST PALM BEACH FL 33407 WEST PALM BE			לחו		•	
THEO THEM DENOTTE SOME				DO NOT WR	ITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	J	
				03/19/1997		
	Place of Business	2a. Mailing Address		4. FEI Number		Applied For
21 120	neamood W,	26		65-0793695		Not Applicable
Suite, Apt.	puter Fh.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	5 Additional Required
City & Stat	1-0	City & State		6. Election Campaign Financing	<u> </u>	00 May Be
23 33	3458 us	28		Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country	8. This corporation owes the cur	rent year Intangible	
24	25		30	Personal Property Tax.	☐ Yes	ZNo
	9. Name and Address of Current	Registered Agent		10. Name and Address of New	Registered Agent	
DAD	LOW, JOAN		81 Name	enneth Dai	ULS	-
	39TH COURT		82 Street Addr	ress (P.O. Box Number is Not Accept	able)	
	ST PALM BEACH FL 33407		120	o Keawood D	<u> </u>	
1123	TALM DEACH FC 33407		83	•		
	•		84 City	``i`a	85 2	ip Code
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dd Dimmont	to the provisions of Continue 607 0502	and 607 4509 Florida Statuto		portion submits this statement for the	FL o	its registered
11. Pursuant office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute f Florida. Such change was au	s, the above-named com	poration submits this statement for the	purpose of changing	its registered registered
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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 of 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:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

134/99 (574) 691-9322

CR2E034 (11/98)