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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000041435

1. Corporation Name

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90011 020 ***150.00

SPACET	RAC, INC.							
Principal Place	of Business	Mailing Address				1 41441 18481	01000 41101 01	14 FWF
401 HUNTING L	ODGE DRIVE	401 HUNTING LODGE DRIVE						
MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166					DO NOT WRITE IN THI	SSPACE		
					3. Date Incorporated or Qualifed	3 OF AGE		
					04/30/1997			Į
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied F	or
21	000 07 000577.200	26			65-0772424		Not Appli	cable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			5.—Certificate of Status Desired		5 Add <u>itio</u> r	
22		27			U. Contracto di Catalo Dodino		Required	
City & State	•	City & State			6. Election Campaign Financing		00 Мау В	
23		28	Countr		Trust Fund Contribution		led to Fees	
Zip	Country	Zip	Country 30	,	This corporation owes the current year leading Personal Property Tax.	itangible	□No	
24	25 9. Name and Address of Current		501		10. Name and Address of New Registered			_
	5. Name and Address of Current	. Kegistered Agent	81	Name				
MAR	QUEZ, MARTIN L		-	01	to a CO O Day Muselper in Not Accomtoble)			
401	Hunting Lodge Drive		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
MAIM	MI SPRINGS FL 33166		83					
	•		84	City		85	Zip Code	
			"		F	LII	•	
						d alexander	a its reaiste	
11. Pursuant i	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the abov	e-named cor	rporation submits this statement for the purpose of	ointment a	s registere	ered
11. Pursuant to office or reagent, I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	2 and 607.1508, Florida Statute of Florida. Such change was aut ions of, Section 607.0505, Flori	s, the abov thorized by da Statutes	e-named cor the corporat	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the app	ointment a	s registere	ered d
agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	ions of, Section 607.0505, Flori	ua Statutes	.		ointment a	is registere	ered d
agent, I ar	m familiar with, and accept the obligation of the state o	t and title if applicable. (NOTE: I	Registered Age	.	ired when reinstating) DATE			
agent, I ar SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	t and title if applicable. NOTE: I	Registered Age	.		ND DIRE	CTORS IN	12
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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 of mystee 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 on a partiachment with all other like empowered.

SIGNATURE: