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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P97000043473
1. Corporation Name	1 07 0000 10 17 0

COLLEZIONE, INC.

## **FILED** Mar 12, 1999 8:00 am Secretary of State

03-12-1999 90017 013 \*\*\*450.00



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Principal Place of Business Mailing Addre		Mailing Address			I (401/40) tin initi inni mult 40114 80111 00	III <b>Biddo</b> filli <b>bid</b> it	INHAN IIII IRDI	
2550 N.W. 39TH	. *	2550 N.W. 39TH STREE	ī					
MIAMI FL 33142 MIAMI FL 33142				DO NOT WRITE IN TH	IS SPACE			
					3. Date Incorporated or Qualifed	10 OF AUL		
					05/12/1997	• •		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
¬ · · · · · · · · · · · · · · · · · · ·		26			NOT APPLICABLE	·	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•			\$8.75	Additional	
22		27			5. Certificate of Status Desired	Fee Re	quired	
City & State	9	City & State			6. Election Campaign Financing	\$5.00	, 1	
23		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip		untry	8. This corporation owes the current year	Intangible	□No	
24	25	29	30	1	Personal Property Tax.  10. Name and Address of New Registere			
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Registere	u Agent		
KUP	ER, JACK			11				
	N.W. 39TH STREET			82 Street Ad	dress (P.O. Box Number is Not Acceptable)			
	WI FL 33142			83	,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		•						
	•			84 City	F	L  85   Zip €	Code	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	e of Florida. Such change wa	s authorized	d by the corpora	rporation submits this statement for the purpose tition's board of directors. I hereby accept the app	of changing its cointment as re	registered gistered	
						٠.		
SIGNATURE					DATE			
	Signature, typed or printed name of registered age			d Agent signature requ		AND DIRECTO	RS IN 12	(00)
12.	OFFICERS AI	ent and title if applicable. (N ND DIRECTORS	13.		ired when reinstating)  DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	PRS IN 12	(41/00)
12.	OFFICERS AI	ND DIRECTORS	13.					14/08/
12. TITLE NAME	OFFICERS AF PD KUPER, JACK	ND DIRECTORS	13. 1.1 T 1.2 N	TILE				E034 (41/08)
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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 receiper 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 a place of the corporation with all other like empowered.

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

305-6384322