## **PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90057 030 \*\*\*158.75

| DOCU  |  |                          |                            |  |  |   |  |                      |                   |                                       |
|---|--|--------------------------|----------------------------|--|--|---|--|----------------------|-------------------|---------------------------------------|
| DOCUMENT # P9700045689 1. Corporation Name E.C. III, INC.   |  |                          |                            |  |  |   |  |                      |                   |                                       |
| E.U. III,   | inc.   |                          |                            |  |  |   |  |                      |                   |                                       |
| Principal Place   | e of Business  | Mailing Add              | dress                      |  |  |   | I SOUTTOUL FIN SOUL EMENT MONTH OF ACTUA A | SBI Altra mildt      | Menta (TIS laus   |                                       |
| 2401 NW 69TH  | STREET   | 2401 NW 69               | JTH STREET                 |  |  |   | }  |                      |                   |                                       |
| MIAMI FL 3314   |  | MIAMI FL 3               |                            |  |  |   |  |                      |                   |                                       |
| ]   |  |                          |                            |  |  |   | DO NOT WRITE IN THIS S   | SPACE                |                   | ٦.                                    |
|   | •  |                          |                            |  |  |   | 3. Date Incorporated or Qualifed   |                      | 1                 | 1                                     |
|   |  |                          |                            |  |  |   | 05/22/1997   |                      |                   | ⇃                                     |
| 2. Principal P  | lace of Business                                     | 2a. Mailing              | Address                    |  |  |   | 4. FEI Number  | <u> </u>             | olied For         | -                                     |
| 21  |  | 26                       |                            |  |  |   | 65-0769518   |                      | Applicable        | 4                                     |
| Suite, Apt.   | #, etc.  |                          | upt. #, etc.               |  |  |   | 5. Certificate of Status Desired   | \$8.75 A             |                   | }                                     |
| 22  |  | 27                       | Anada - 1111 - 1111 - 1111 |  |  |   |  |                      |                   | 1                                     |
| City & Stat   |  | City & S                 | cate                       |  |  |   | 6. Election Campaign Financing Trust Fund Contribution   | :-\$5:00<br>Added to | •                 |                                       |
| 23  | Country  | Zip                      |                            | Cor  | ıntry  |   | 8. This corporation owes the current year Intal  |                      | - 443             | 1                                     |
| Zip   | 25   | 29                       | 30                         | ٦.   |  |   |  |                      | I⊉No Ì            | İ                                     |
| 24  | 9. Name and Address of Current                       |                          |                            |  | <del></del>  |   | 10. Name and Address of New Registered A   | gent                 |                   | 1                                     |
| <del>_</del>  | 3. Name onto Address of Correct                      | regioneres Ag            |                            |  | 81   | Name  |  |                      |                   | 1                                     |
| LESI  | NIK, GARY  |                          |                            |  |  |   |  |                      |                   | 1                                     |
| 240   | I NW 69TH STREET                                     |                          |                            |  | 85   | Street A  | ddress (P.O. Box Number is Not Acceptable)   |                      | 1                 |                                       |
| MIÀI  | VI FL 33147  | *                        | _                          | - '  | 83   |   |  | <del></del>          | -                 | 1                                     |
|   |  |                          |                            |  |  |   |  | <del></del>          |                   | 1                                     |
| ı   |  |                          |                            |  | 84   | City  | FI   | 85 Zip C             | ode               | 1                                     |
| 41 Purcuant   | to the provisions of Sections 607 0502               | and 607.1508             | Florida Statutes.          | the a  | bove   | -named co   | progration submits this statement for the purpose of c   | hanging its :        | egistered         | 1                                     |
| office or r   | egistered agent, or both, in the State of            | Florida, Such            | change was auth            | orizec   | d by t   | the corpor  | orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoint  | lment as reg         | stered            | Ì                                     |
| ŀ   | m jamiliar with, and accept the boligat              | IUIS DI, SACIION         | 007.0303, FIGHOR           | o Olai   | шоэ.   |   |  |                      |                   |                                       |
| SIGNATURE   | Signature, typed or printed name of registered agent | and tille if applicable. | (NOTE: RA                  | gistered   | Agent  | t signature req   | uired when reinstelling) DATE  |                      |                   | l a                                   |
| 12.   | OFFICERS AN  | DIRECTORS                |                            | 13.  |  |   | ADDITIONS/CHANGES TO OFFICERS AND  |                      |                   | 11/08                                 |
| TITLE   | D  |                          | DELETE                     | 1,1 Π  | TLE  |   | •  | Change               | Addition          | È                                     |
| NAME  | LESNIK, GARY   |                          | •                          | 1.2 N  | 44.00  |   |  |                      | 1                 | 3                                     |
| STREET ADDRESS  | 2401 NW 69TH STREET                                  |                          | ,                          |  | -  |   |  |                      |                   | 1 1                                   |
| CITY-ST-ZIP   | MIAMI FL 33147                                       |                          | L.                         | 1.3 \$1  |  | ADDRESS   | ,  |                      | •                 | Ĕ                                     |
| TILE  |  |                          |                            |  |  |   | ,  | •                    | ·                 | ROEUG                                 |
| ,   | D .  |                          | DELETE                     |  | TY-ST  |   | ,  | , Change             | ☐ Addition        | CRDEO                                 |
| NAME  | D<br>Lesnik, Jill                                    | <del>-</del>             | DELETE                     | 1.4 CI   | TREET.   |   |  | , Change             | ☐ Addition        | CROFO                                 |
| i i   | <del>-</del>   |                          | DELETE                     | 1.4 CF<br>2.1 TF<br>2.2 NV   | TREET.<br>TY-ST<br>TLE   |   | •  | Change               | ☐ Addition        | CROECK                                |
| NAME  | LESNIK, JILL   |                          | ☐ DELETE                   | 1.4 CI<br>2.1 TI<br>2.2 NV<br>2.3 ST   | TREET.<br>TY-ST<br>TLE   | -ZIP ADDRESS  | ,  | Change               |                   | CROEN                                 |
| NAME<br>STREET ADDRESS  | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | ☐ DELETE                   | 1.4 CI<br>2.1 TI<br>2.2 NV<br>2.3 ST   | TREET, TY-ST TLE AME TREET   | -ZIP ADDRESS  | ,  | Change               | ☐ Addition        | CROFO                                 |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          |                            | 1.4 CF<br>2.1 TF<br>2.2 N/<br>2.3 SF<br>2.4 C  | TREET, TLE AME TREET, TLE TTLE   | -ZIP ADDRESS  | ,  |                      |                   | CROFO                                 |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          |                            | 1.4 CF<br>2.1 TF<br>2.2 NV<br>2.3 SF<br>2.4 CF<br>3.1 TF<br>3.2 NV   | TY-ST<br>TLE<br>AME<br>TREET.<br>TTY-ST<br>TLE   | -ZIP ADDRESS  | ,  |                      |                   | C.ROEO                                |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          |                            | 1.4 CT<br>2.1 TT<br>2.2 NV<br>2.3 ST<br>2.4 C<br>3.1 TT<br>3.2 NV<br>3.3 ST  | TY-ST<br>TLE<br>AME<br>TREET.<br>TTY-ST<br>TLE   | ADDRESS (-ZIP   |  | Change               | Addition          | CROED.                                |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          |                            | 1.4 CT<br>2.1 TT<br>2.2 NV<br>2.3 ST<br>2.4 C<br>3.1 TT<br>3.2 NV<br>3.3 ST  | TY-ST<br>TY-ST<br>TREET,<br>TY-ST<br>TILE<br>AME<br>TREET,   | ADDRESS (-ZIP   | ,  |                      |                   | CB0E0                                 |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | ☐ DELETE                   | 1.4 CZ<br>2.1 TI<br>2.2 NV<br>2.3 ST<br>2.4 CZ<br>3.1 TV<br>3.2 NV<br>3.3 ST<br>3.4 CZ   | TREET, TY-ST TLE TREET, TLE TREET, TLE TREET, TLE TREET, TLE TREET,  | ADDRESS (-ZIP   |  | Change               | Addition          | CROEO.                                |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | ☐ DELETE                   | 1.4 CT<br>2.1 TT<br>2.2 NV<br>2.3 ST<br>2.4 CT<br>3.1 TT<br>3.2 NV<br>3.3 ST<br>3.4 CT<br>4.1 TT<br>4.2 N  | TY-ST<br>TILE<br>AME<br>TREET,<br>TILE<br>AME<br>TREET,<br>TILE<br>TILE  | ADDRESS (-ZIP   |  | Change               | Addition          | CROECK                                |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | OELETE                     | 1.4 CI<br>2.1 TI<br>2.2 NV<br>2.3 ST<br>2.4 C<br>3.1 TI<br>3.2 NV<br>3.3 ST<br>3.4 C<br>4.1 TI<br>4.2 NV<br>4.3 ST<br>4.4 CI   | TREET, TITY-ST TITE THE TITY-ST TITE THE TITY-ST TITE THE TITY-ST TITE THE TITY-ST TITY-ST TITY-ST TITY-ST   | ADORESS ADORESS ADORESS ADORESS                         | ·  | ☐ Change             | Addition          | CROECK CROPER                         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | ☐ DELETE                   | 1.4 CF<br>2.1 TF<br>2.2 NV<br>2.3 SF<br>2.4 CF<br>3.1 TF<br>3.2 NV<br>3.3 SF<br>4.1 TF<br>4.2 N<br>4.3 SF<br>4.4 CF<br>5.1 TF  | TREET. TILE TILE TILE TILE TILE TILE TILE TILE   | ADORESS ADORESS ADORESS ADORESS                         | ·  | Change               | Addition          | E PASEO                               |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | OELETE                     | 1.4 CZ<br>2.1 TT<br>2.2 NV<br>2.3 ST<br>2.4 CC<br>3.1 TT<br>3.2 NV<br>3.3 ST<br>4.1 TT<br>4.2 NV<br>4.4 CZ<br>5.1 TT<br>5.2 NV   | TREET, TITLE TITLE THE TIT | ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP | ·  | ☐ Change             | Addition          | E CROEO                               |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | OELETE                     | 1.4 CZ 2.1 TT 22 NV 2.3 ST 2.4 CC 3.1 TT 3.2 NV 3.3 ST 3.4 CC 4.1 TT 4.2 NV 4.9 ST 4.4 CC 5.1 TT 5.2 NV 5.3 ST 5.3 | TREET, TIVE AME  | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS         | ·  | ☐ Change             | Addition          | CROECY.                               |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | OELETE  DELETE             | 1.4 CZ 1 TT 22 NV 23 ST 2.4 CC 3.1 TT 4.2 NV 4.4 CT 5.1 TT 5.2 NV 5.3 ST 5.4 CC 7.5 TT | TREET, TTY-ST TILE  AME TREET, TTY-ST TILE  AME TREET, TTY-ST TILE  AME TRY-ST TILE  TTY-ST TILE  TTY-ST   | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS         |  | Change               | Addition Addition | C C C C C C C C C C C C C C C C C C C |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | OELETE                     | 1.4 CZ 21 TI 22 NV 23 ST 3.4 CC 4.1 TI 4.2 NV 4.3 ST 4.4 CC 5.1 TI 5.2 NV 5.3 ST 5.4 CC 6.1 TI 5. CC 6.1 TI 5.4 CC | TREET, TTY-ST TILE  AME TREET, TTY-ST TILE  AME TREET, TTY-ST TILE  TTY-ST TILE  TTY-ST TILE   | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS         |  | ☐ Change             | Addition          | U SUBORU                              |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP                             | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | DELETE DELETE              | 1.4 CZ 1 TT 22 NV 23 ST 2.4 CC 3.1 TT 4.2 NV 4.4 CT 5.1 TT 5.2 NV 5.3 ST 5.4 CC 7.5 TT | TREET, TTY-ST TILE  AME TREET, TTY-ST TILE  AME TREET, TTY-ST TILE  TTY-ST TILE  TTY-ST TILE   | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS         |  | Change               | Addition Addition | C C C C C C C C C C C C C C C C C C C |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | LESNIK, JILL<br>2401 NW 69TH STREET                  |                          | OELETE  DELETE             | 1.4 CZ<br>2.1 TI<br>2.2 NV<br>2.3 ST<br>2.4 C<br>3.1 TT<br>3.2 NV<br>3.3 ST<br>4.4 CT<br>5.1 TT<br>5.2 NV<br>5.3 ST<br>5.4 CT<br>6.1 TT<br>6.2 NV  | TY-ST-TILE  | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS         |  | Change               | Addition Addition | C C C C C C C C C C C C C C C C C C C |

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 eath; 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:

CITY-ST-ZIP

SIGNATURE REQUIRED

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR