## 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** 

## DOCUMENT # P97000048043

STREET ADDRESS

CITY-ST-ZIP

ZADEN PROPERTY CORPORATION

DIDEN I		·				
Principal Place	e of Business	Mailing Address		1 (551)551 110 1011 10211 00111 00111 00111		
4318 N.E. 23RD AVE. 4318 N.E. 23RD AVE.						
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308				DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualifed	11110-01-7401	
				05/28/1997	,	
. Di-1-1-	Non of Business	2a. Mailing Address	<del></del>	4. FEI Number	App	lied For
		•	65-0764454	<u> </u>	Applicable	
26   Suite, Apt, #, etc.   Suite, Apt, #, etc.				\$8.75 A		
Suite, Apr. 47, Co.			5. Certifcate of Status Desired	Fee Req		
22     27       City & State   City & State		·	6. Election Campaign Financing	\$5.00 M	May Be	
23 28 28			Trust Fund Contribution	Added to	•	
Zip Country Zip		Country	8. This corporation owes the current ye		/	
24	25	29	30	Personal Property Tax.		<b>P</b> No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regist	ered Agent	
		St. J. F. C.	81 Name			
ZADEN, RICHARD 1749 N.E. 26TH ST.			82 Street A	Address (P.O. Box Number is Not Acceptable)		
FT. LAUDERDALE FL 33305			83		1714 - 725	B. 新疆。
				<b>一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>	Harry Strait	1400年
			84 City	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FI 85 Zip C	ode
SIGNATURE	Signature, typed or printed name of registered ago OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12
TITLE .	DP	☐ DELETE	1.1 TITLE	<b>全型的基础等</b>		
NAME	ZADEN, MARIAN		1.2 NAME			
STREET ADDRESS	1717 11121 22112 1112		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	□ per str	1.4 CITY-ST-ZIP		. Change	Addition
TITLE	DS	☐ DELETE	2.1 TITLE			
NAME	ZADEN, MARK		2.2 NAME			
STREET ADDRESS	1		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33308		2.4 CITY-ST-ZIP		☐ Change	☐ Addition
TITLE Zel	DVT	☐ DELETE	3.1 TITLE	•		
NAME	ZADEN, JOSEPH M. D.M.	T <sub>A</sub> 3	3.2 NAME			
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NAME	da a		4.2 NAME			
STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·	4.3 STREET ADDRESS			
CITY-ST-ZIP .	<u> </u>	Concert	4.4 CITY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TITLE		onange	
NAME			5.2 NAME		•	
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		,	5.4 CITY-ST-ZIP	· 13 13 1	[*] Change	Addition
TITLE	\$319 H.S. 2007 (1.47)	, DELETE	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		Change	☐ Addition

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 of on an attachment with an address, with all other like empowered.

**FILED** 

Feb 03, 1999 8:00am

**Secretary of State** 

02-03-1999 90004 030 \*\*\*150.00