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## 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 # PO700018332

1. Corporation CONCES	SION MANAGEMENT OF PA						
Principal Plac	e of Business	Mailing Address				#1684   G168   1110	# 11410 1404 1001
3601 W. COMMERCIAL BLVD. 3601 W. COMMERCIAL BLVD.							
4					DO NOT WHITE WITHOUT OF ACT		
FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309				DO NOT WRITE IN THIS SPACE		<del></del>	
				•	3. Date Incorporated or Qualifed		
2 Principal P	Place of Buşiness	2a. Mailing Address			06/02/1997 4. FEI Number		Applied For
21	NA	26	A		65-0759123		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			1		Additional
22		27			5. Certifcate of Status Desired	Fee F	Required
City & Star	te "	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Ir		Acr
24	25	29 30	<u> </u>		Personal Property Tax.	Yes	No
<del></del> _	9. Name and Address of Current	t Registered Agent	81	Name	10. Name and Address of New Registered	Agent	<del></del>
GRAH	HAM, DAVID E		0.	Name	$\mathcal{N}A$		
3601 W. COMMERCIAL BLVD.			82	Street Ad	ddress (P.O. Box Number & Not Acceptable)		
4			83				
FT. L	AUDERDALE FL 33309		55				
, ,			84	City	FI	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 0500	2 and 607 1508 Florida Statutes	the above	-named co	progration submits this statement for the purpose of	f changing it	ts registered
office or I	registered agent, or both, in the State of the familiar with, and accept the obligation	of Florida. Such change was auth fons of, Section 607.0505, Florida 2	orized by a Statutes	the corpora	ation's board of directors. I hereby accept the appo	intment as r	egistered
	Signature, typed or printed name of registered agent		<del></del>	t signature req	(used when reinstating) DATE	ND DIDEOT	ODC (1) 40
12.	OFFICERS ANI	D DIRECTORS  DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS A	Change	
TITLE	GRAHAM, TAMEA BEHRONT		1.2 NAME	]		Cinarigo	- Gradulon
NAME STREET ADDRESS			1.3 STREET	ADDOCES	1/		ĺ
	FT. LAUDERDALE FL 33309	,		ì	A I / A		}
CITY-ST-ZIP TITLE	PD	DELETE 2.1 TI		-217		Change	Addition
NAME	JIMINEZ, CESAR	2.2 NA					_
STREET ADDRESS				ADDRESS	11		
CITY-ST-ZIP	57 1 (110 Cmp 11 Cm) 44445		2.4 CITY-S		$\mathcal{N}/\mathcal{A}$		ĺ
TITLE .	DVP	DELETE	3.1 TITLE			☐ Change	Addition
NAME	GRAHAM, DAVID E	The second secon	3.2 NAME	- 3	سيهد بشبيطهيدا د يو		
STREET ADDRESS	The state of the s		3.3 STREET	ADDRES\$	a1/a		1
CITY-ST-ZIP	FT. LAUDERDALE FL 33309			T-ZIP	10//4		
TTLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME	,		4, 2 NAME		•		
STREET ADDRESS	RESS 4.3 S		4.3 STREET	ADDRESS	11/1		[
CITY-ST-ZIP			4.4 CITY-ST	-ZIP	10 / /4		
TITLE	-	☐ DELETE	5.1 TITLE	1	NJA	☐ Change	Addition
NAME	j		5.2 NAME	1	,		}
STREET ADDRESS			5.3 STREET		11/12		}
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY-ST 6.1 TITLE	-ZIP	11/2		
TITLE		☐ DELETE		1	,	Change	Addition
The state of the s			6.2 NAME	annorse	/		ļ
STREET ADDRESS			6.3 STREET	ALUNESS	11/1		1

14. I hereby certify that the information supplied with the 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 recute 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.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP