SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000048948 1. Corporation Name

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90004 033 ***550.00

IUGEDI	HEWITT, INC.	V						
JUSEFF	T TEVALLE INC.				1 (****	II. A (BI): (BA II B BI:)	*****	
rincipal Place	e of Business	Mailing Address			 			YI BURDU 1811 B XBXII BYBBY XBXI (BB)
346 PINE TRE		5346 PINE TREE DRIVE					•	
DELRAY BEACH FL 33484 DELRAY BEACH FL 33484			4					
					3. Date incorpora	DO NOT WR		S SPACE
					06/04/199		u	
Principal DI	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>		Applied For
	PASO FINO DR	26 107/2 PAS	so fine	DR	65-075864	1		Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of S			\$8.75 Additional Fee Required
City & State	<u> </u>	City & State			6. Election Camp	aign Financing		\$5.00 May Be
LAKE 6	WORTH FL	28 LAKE WORTH	FL		Trust Fund Co	ntribution	<u> </u>	Added to Fees
Zip 33467	Country 7 25 PALM BEACH	Zip 29 33467	Countr 30	Y LM BEACH	8. This corporation Intangible Person		rent year	Yes No
70 TO 1	9. Name and Address of Current	<u> </u>	130 -77	<i>D.7 DC.</i>	10. Name and Ad		Registered	
		Trogiolog 7 gont	8	Name				
	VITT, JOSEPH		82	#EW	ress (P.O. Box Number		table)	_
	6 PINE TREE DRIVE		102	B (1)		FIND	ñ.	
DEL	RAY BEACH FL 33484	•	83	3				
			84	4 City				85 Zip Code
			١٣	* Y W	KINETH		FL	- 33467
				IHEE	V V D /			
l. Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statute	s, the above	City CHE e-named corpo	pration submits this sta	tement for the	ourpose of c	hanging its registered
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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, or on an attachorent with an address.

GNATURE: