FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90088 011 ***150.00

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000050928

. Corporation Name

STREET ADDRESS

BEKER ENTERPRISES, INC.

DENLIT	INTERNATIONS.							
Principal Place of Business Mailing Address								
300 Granada Boulevard 6300 Granada Boulevard								
SEBRING FL 33872 SEBRING FL 33872					DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualifed 06/02/1997			
		2a Mailing Address			4. FEI Number	Apr	olied For	15
2. Principal Place of Business 2a. Mailing Address					65-0763855	<u> </u>	Applicable	***
1		Suite, Apt. #, etc.				\$8.75 Additional		***
Suite, Apt. #, etc. Suite, Apt. 7			.,		5. Certifcate of Status Desired	Fee Re		1
2 City & State	City & State	& State		6. Election Campaign Financing	\$5.00	May Be	1	
	e	28			Trust Fund Contribution	Added to	o Fees	ł
Zip	Country	Zip	Cou	intry	8. This corporation owes the current year In	tangible		
4	25		10		Personal Property Tax.	☐Yes	₩No	
4	Name and Address of Curren				10. Name and Address of New Registered	Agent		ŀ
	مهرا بالمواج استنا لقطا وكالا	3,22		81 - Name	فيدومو النبي التدميسيوسيوريات يا		·	-
	KER, ZAKIEH S			82 Street Ad	dress (P.O. Box Number is Not Acceptable)			İ
6300 GRANADA BOULEVARD					<u> </u>	<u> </u>	1 4 6 A 8 A 8 A 8 A 8 A 8 A 8 A 8 A 8 A 8 A	
SEBRING FL 33872				83		1		ĺ
	*			84 City		es Zin (
					Fl			
	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such criange was au- tions of, Section 607.0505, Flori	da Stat	utes.	rporation submits this statement for the purpose of the purpose of the statement for the s	ointment as re	gistered	
Signature, typed or printed name of registered agent and tritle if applicable. (NOTE: N			Registered	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	Ş
12.		DELETE	1.1 T	m e	Abbinoitorenintele ve en en	Change	☐ Addition	3
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NAME	COCO CRANADA ROUI EVARD		2.2 N	l l				
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MAME	1.84		6.21	NAME				1

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 truetee 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, by on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE: SIGNATURE:

99 941-452-6488 Daytime Phone # 11335