## 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 # P9700052554

## **FILED** Jan 22, 1999 8:00am Secretary of State 01-22-1999 90056 039 \*\*\*150.00

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						3. Date Incorporated or Qualifed	1110 017102	
						06/13/1997		:
2 Principal F	Place of Business	2a. Mail	ling Address			4. FEI Number		plied For
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<b>⊢</b> •	ile .	_ <del> </del>	Q State			6. Election Campaign Financing	-	May Be
23 7in	Country	28		Cours		Trust Fund Contribution		to Fees
Zip	Country	Zip		Count	ır <b>y</b>	8. This corporation owes the current year		
24	25	29		30		Personal Property Tax.	Yes	□No
	9 Name and Address of Curre	nt Registered	Agent		31 Name	10. Name and Address of New Register	red Agent	
PO!	VMAN, GEORGE K	u Maria de Servicio		\ \frac{1}{3}	Name			{
	1 SE 3RD COURT			1	Street Add	dress (P.O. Box Number is Not Acceptable)		
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DEE	RFIELD FL 33441			{	13			1.4
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	in the control of the	: ** <u></u> .		. [			⁻┺ │	. <u>. •</u>
.11. Pursuant	to the provisions of Sections 607.05	02 and 607.15	08, Florida Statu	ites the abo	ove-named con	poration submits this statement for the purpose	e of changing its	registered
office or I	registered agent, or both, in the State	e of Florida. Sเ	uch change was :	ites, the abo	ove-named corporati	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	e of changing its opointment as re	registered gistered
office or a agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga-	e of Florida. Sเ	uch change was :	ites, the abo	ove-named corporati	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	e of changing its oppointment as re	registered gistered
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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 execute 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 trestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on the receiver with an address with all other like empowered.

SIGNATURE: