Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90087 026 ***150.00

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 # P97000056213

1. Corporation KUNTA	on Name U CORPORATION	000210							
Principal Place of Business 2940 SW 30TH AVE SUITE 4		Mailing Address 2940 SW 30TH AVE				_		1 1 1110 1 1118 110	HT 11802 1111 1881
PEMBROKE PA	ARK FL 33009	SUITE 4 PEMBROKE PARK FL 330	^						
00		US	U			3. Date Incorporated or Qualifed	IE IN THIS	3 SPACE	· · · · · · · · · · · · · · · · · · ·
						06/26/1997			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	11,	Applied For		
21		26			65-0763324	-	<u> </u>	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Additional	
22		27			5. Certifcate of Status Desired			Required	
City & State		City & State			6. Election Campaign Financing	<u></u>	\$5.00	May Be	
23		28			Trust Fund Contribution Added to Fees				
Zip Country		Zip Country			8. This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	Registered	Agent	
FRANKEL, EVAN D PA				81	Name				
8025 BISCAYNE BLVD			Į.	82	Street Addre	ss (P.O. Box Number is Not Accepta	able)		
	MI FL 33138								
			1	83					
				84	City			85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,							FL	_ `	
agent, I a	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	orida Statut	es.	signature required	when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS Delete			13.		ADDITIONS/CHANGES TO OFF	FICERS AN		
TITLE	FRANKEL, EVAN D	[] DELETE		1.1 TITLE				☐ Change	Addition
NAME	AND OWN ANTH AUT OFFICE		1.2 NAM						
STREET ADDRESS	PEMBROKE PARK FL 33009		1.3 STRI	EETA	DORESS				
CITY-ST-ZIP	D	□ DELETE	1.4 CITY		ZIP				
TITLE	HERNANDEZ, ISMAEL R		2.1 TITLE					Change	☐ Addition
NAME STREET ADDRESS	AA 4A AN 4 AATH 1 11 TO ALUTTE 4		2.2 NAM	_		• :			
CITY-ST-ZIP	PEMBROKE PARK FL 33009		2.3 STRE			and the second control of the second control	· ~ ~~~~	2252 - 2 104100 0	
TITLE	TEMORORE FAIR TE 00003	☐ DELETE	2.4 CITY 3.1 TITLE		ZIP			Change	☐ Addition
NAME		Section	3.2 NAM					□ Change	☐ Audition
STREET ADDRESS			3.2 NAM		DDD500				
CITY-ST-ZIP									
TITLE	☐ DELETE			3.4. CITY-ST-ZIP 4.1 TITLE				☐ Change	Addition
NAME		<u>_</u>	4. 2 NAM						□ Addition
STREET ADDRESS			4.3 STRE		nnores			•	
City-St-Zip			4.4 CITY						
TITLE		☐ DELETE	5.1 TITLE		-"			☐ Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STRE	ETAD	ODRESS	·			
CITY-ST-ZIP			5.4 CITY-	-ST-Z	'IP				
TITLE	-	☐ DELETE	6.1 TITLE	<u> </u>				Change	Addition
NAME			CO MANE	_				_ •	

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

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP