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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90182 021 ***150.00

561-689-95a

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000056233

Mailing Address

3110 W. 45TH STREET

1. Corporation Name

Principal Place of Business 3110 W. 45TH STREET

STREET ADDRESS

SIGNATURE

M2O CORPORATION

| SUITE 1 WEST PALM BE | ACH EL 33407 | | WEST PALM BEACH FL 33407 | | | | DO NOT WRITE IN THIS SPACE | | | | |
|--------------------------|---|---------------------|--------------------------|----------------|-------|----------------------|----------------------------|--|----------------------------|------------------------------|-------------------------|
| WEST FREM DE | | | | · • · | | | 3. | Date Incorporated or Qualifed 06/25/1997 | | | |
| 2. Principal Pl | ace of Business | 2a. M | ailing Address | | _ | | 4. | FEI Number | | Ar | plied For |
| 21 | | | 26 | | | | | 65-0764528 | <u> </u> | No | ot Applicable |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 5. | Certificate of Status Desired | | * | Additional guired |
| City & State | | | ity & State | | — | | _ | Election Campaign Financing | | \$5.00 | May Be |
| 23 | · | 28 | | | | | <u> </u> | Trust Fund Contribution | | • | to Fees |
| Zip | Country | L, Zi | P | Coun | try | | 8. | This corporation owes the curr | rent year Int | | |
| 24 | 25 | 29 | <u> </u> | 30 | | | | Personal Property Tax. | | ∐ Yes | □No |
| | 9. Name and Address of Currer | nt Register | ed Agent | | - | | 10. | Name and Address of New | Registered | Agent | { |
| DITTI | MAN IEDDY D | | | [* | B1 | Name | | , . | | | |
| | Man, Jerry R W. 45th Street | | İ | | | Street Addre | ess (P | P.O. Box Number is Not Accept | able) | | |
| SUITE 1 | | | | | вз | | | | | | |
| WEST PALM BEACH FL 33407 | | | | | 84 | City | | | | 85 Zip | Code |
| | | | | | 1 | | | | <u>FL</u> | | |
| office or re | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. | Such change was at | ⊔tnorizea | Dy 1 | tne corporatior | ratior n's bo | n submits this statement for the pard of directors. I hereby acce | purpose of pt the appoi | changing its ntment as re | registered egistered |
| SIGNATURE | Signature, typed or printed name of registered age | at and little if an | olioable /NOTE | - Denictored L | neni | t signature required | when n | reinstating) | DATE | . | } |
| 12. | OFFICERS A | | | 13. | 90 | - Lugitator | | ADDITIONS/CHANGES TO OF | FICERS AN | D DIRECTO | DRS IN 12 |
| TITLE | PD | TO BITCEOT | [] DELETE | 1.1 TITI | E | | | | | Change | Addition |
| NAME | PITTMAN, JERRY R | | - · | 1.2 NAN | | | | | | | |
| STREET ADDRESS | 3110 W. 45TH STREET, STE. | #1 | | | | ADDRESS | | | | | l |
| | WEST PALM BEACH FL 33407 | | | 1.4 CIT | | | | | | | i |
| CITY-ST-ZIP TITLE | TSD | | DELETE | 2.1 TITL | | | | | | ☐ Change | Addition |
| NAME | TILLMAN, THOMAS D | | | 2.2 NA | | | | | | | |
| STREET ADDRESS | 82 SATINWOOD LANE | ~ | | · ~ -y | | ADDRESS | - | · | man part land | ÷ - | |
| CITY-ST-ZIP | PALM BEACH GARDENS FL 3 | 3410 | | 2. 4 CIT | | | | | | | |
| TITLE | 17.011 00 107. 00 11.00.110 1.00 | | ☐ DELETE | 3.1 1111 | | | | | | ☐ Change | Addition |
| NAME | | | | 3.2 NAM | Æ | ĺ | | | | | [|
| STREET ADDRESS | | | | 3.3 STF | EET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 3,4. CIT | Y-8 | T-ZIP | | | · | | |
| TITLE | | | OELETE | 4.1 TIπ | £ | | | | | Change | ☐ Addition |
| NAME | | | | 4, 2 NA | ME | 1 | | | | |] |
| STREET ADDRESS | | | | 4.3 STF | REET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 4.4 CIT | Y-S7 | T-ZIP | | | | | { |
| TITLE | | | ☐ DELETE | 5.1 TIT | E | | | , | | Change | ☐ Addition |
| NAME | | | | 5.2 NA | ΛĘ | | | | | | |
| STREET ADDRESS | • | | | 5.3 STF | REET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 5.4 CIT | _ ` | r-ZIP | | | | | |
| TITLE | | | ☐ DELETE | 6.1 TITL | E | | | | | ☐ Change | ☐ Addition |
| NAME | | | | 6.2 NA | ΛE | ļ | | | | | |

6.3 STREET ADDRESS

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 cerporation 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 18 if changed, of on an attachment with an address, with all other tike empowered.