Applied For

Fee Required

Not Applicable \$8.75 Additional

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000056664**

Corporation Name

Principal Place of Business	Mailing Address					
831 PUNNERS WAY. NO LAUDERDALE FL 33068	1831 RUNNERS WAY NO LAUDERDALE FL 33068					
	2a. Mailing Address					
<u> </u>	2a. Mailing Address					
Suite, Apt. #, etc.	— ·					
11	_Suite, Apt. #, etc					
Suite, Apt. #, etc.	26Suite, Apt#, etc					

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90148 038 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

06/26/1997 4. FEI Number

65-0762471

City & State		City & State	-			6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees				
23	Country	28		untry					O Fees	
Zip 24	Country Zip 29 30			ции у		 This corporation owes the currer Personal Property Tax. 		igible ∐Yes	ZNo	
g Name and Address of Current Registered Agent						gent				
SMITH, ROWAN				81	Name					
					 	(DOD)	1-1			
1831 RUNNERS WAY NO LAUDERDALE FL 33068				82	Street Add	dress (P.O. Box Number is Not Acceptab	ie}			
				83						
			•							
				84	City		FL	85 Zip C	Code	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered a	e of Florida. Such change w gations of, Section 607.0505	ras authorize , Florida Sta	d by t tutes.	the corpora	rporation submits this statement for the p tion's board of directors. I hereby accept arred when reinstating)	urpose of ch the appoint	nanging its ment as reg	registered gistered	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	RS IN 12	
TITLE	D DELETE					7,001110,107,011111020 10 0111		Change	Addition	
NAME	SMITH, ROWAN			1.2 NAME						
STREET ADDRESS	ARRIVED WAY			1.3 STREET ADDRESS						
CITY-ST-ZIP	NO LAUDERDALE FL 33068			1.4 CITY-ST-ZIP						
TITLE	0	☐ DELETI		2.1 TITLE				Change	☐ Addition	
NAME	LARGIE, SOPHIA		2.2 N	IAME						
STREET ADDRESS	1831 RUNNERS WAY		2.3 S	TREET	ADDRESS					
CITY-ST-ZIP	_NO_LAUDERDALE FL 33068 -		2.40	CITY-\$1	-ZIP	•				
TITLE	DELETE			ITLE				Change	Addition	
NAME			3.2 N	IAME						
STREET ADDRESS			3.3 8	TREET	ADDRESS					
CITY-ST-ZIP			3.4.	CITY-ST	ſ-ZIP					
TITLE		☐ DELET	E 4.1 T	TTLE				☐ Change	Addition	
NAME	i		4.21	NAME						
STREET ADDRESS			4.3 9	TREET	ADDRESS					
CITY-ST-ZIP			4.4 0	ITY-ST	- ZIP					
TITLE	☐ DELETE			5.1 TITLE				☐ Change	Addition	
NAME	(5.2 N	IAME						
STREET ADDRESS			5.3 8	TREET	ADDRESS					
CITY-ST-ZIP				ITY-ST	- ZIP					
TITLE		☐ DELET	E 6.1 T	TILE				☐ Change	☐ Addition	
NAME			6.21	IAME	}					
STREET ADDRESS			6.3 8	TREET	ADDRESS					
CITY-ST-ZIP			6.4 0	TY-ST	- ZIP					

1 hereby certify that the information supplied with this filing does not quality 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.

SIGNATURE:

Daytime Phone #