PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700061854

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90035 040 ***150.00

Corporation ADOM DI		001001		
AHUN U	EVELOPMENT, CORP.			(2002/2005) 14 (2007) 2008 DANK DANK DANK DERH ADMA DIKAT (1807) 1807 DIKAT DIKAT (1805
Principal Place	e of Business	Mailing Address		T 1991/401 (10 19)() 1901) 1901) GONI ÁOUX EDES BOSO OLIDA (1007 ACIDA A
705 S.W. 13TH STREET 705 S.W. 13TH STREET				·
FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				07/15/1997
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0708970 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5 Contifered of Status Posited \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State	е	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax.
24	25	29 30	0	Personal Property Tax. Lives Lives 10. Name and Address of New Registered Agent
	9. Name and Address of Current	. Registered Agent	81 Name	
BRIC	KEL, JILL H. C			Jill Highchel, CIA
19495 BISCAYNE BLVD., STE. #705			82 Street A	Address (P.O. Box Number is Not Acceptable)
	ENTURA FL 33180		83	500 0000 01 1 5/0500
			20	0533 Biscayne Blud. Ste 532
			84 City	Aventura FL 85 Zip Code 33180
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.				
SIGNATURE	Q:11\$A.13	nieller CP1		1/13/99
	Signature typed or printed name of registered agent		egistered Agent signature re	
12.	OFFICERS ANI	D DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 V12 Control Contro
TITLE	P PON KUDT		1.2 NAME	Kurt Aron
NAME	ARON, KURT 187 NE 6TH COURT	and the second	1.3 STREET ADDRESS	- Z = 1 2th stonet
STREET ADDRESS	DANIA FL 33004		1.4 CITY-ST-ZIP	Et 10, 1000 do 10 5 33315
CITY-ST-ZIP TITLE	DANIA FL 33004	☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
			2. 4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		<u>.</u>	4.4 CITY- ST- ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	' [
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME 6.3 STREET ADDRESS	
STREET ADDRESS	1		= p.3 STREET ADDRESS	11

CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI