PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

1999

**DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000064281

## Feb 24, 1999 8:00 am Secretary of State 02-24-1999 90017 048 \*\*\*150.00

UNITY M Principal Place 1990 NW 22ND MIAMI FL 33122	AVE.	Mailing Address 8990 NW 22ND AVE. MIAMI FL 33122	<del></del>		DO NOT WR		,	
	-	-		·~	3. Date Incorporated or Qualifed 07/24/1997		<del></del> -ر -اننـــــــــــــــــــــــــــــــــــ	·
2. Principal Pl	ace of Business	Ze. Mailing Address			APPLIED FOR #65	-087/3		Applicable
Suite, Apt. a	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	0	\$8.75 A	dditional
City & State	•	City & State			6. Election Campaign Financing		\$5.00	May Be
]	Country	26 Zip	Coun	try -	Trust Fund Contribution  8. This corporation owes the curr		Added to	Fees
Zip ] _		<u> </u>	0		- Personal Property Tax:		[Ves=	⊡No
_ =====================================	9. Name and Address of Current		1		10. Name and Address of New F			
	Monte one reduced of Content		1	81 Name				
	Deh, reena Hawkes Bluff Avenue			82 Street /	Address (P.O. Box Number is Not Accepte	ible)	;	
DAVIE FL 33331				83	<u> </u>			
			<b>,</b>	84 City		FL	85 Zip C	pde
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IGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and the disoplicable. (NOTE: R	ngistered A	gent signature re	corporation submits this statement for the ration's board of directors. I hereby acception when revisiting and when revisiting ADDITIONS/CHANGES TO OF	DATE	D DIRECTOR	RS IN 12
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I nervoy certify that the information supplies with this liming does not quality for the exemption stated in Decount 19.07(3)(i). Florida Statutes, if other Certify that the Information disclosed 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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE: