Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90022 037 ***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 # P97000065797

1. Corporation Name

nadia a	LAN ENTERPRISES, INC.						
Principal Place	of Business	Mailing Address			t 10051001 tro fortrands editi metir matti editi d	11 8 1 2 1111 12 12 14	MITT MAT 1441
22721 MERIDIANA DRIVE BOCA RATON FL 33433 22721 MERIDIANA DRIVE BOCA RATON FL 33433					DO NOT WRITE IN THIS S	SPACE	
					Date Incorporated or Qualifed 07/30/1997		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21		26			65-0770758		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Re	1
City & State	9	City & State	_		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip 24	Country 25		Country	,	This corporation owes the current year Inta Personal Property Tax.		□No
24	9. Name and Address of Current		1		10. Name and Address of New Registered A	gent	
			81	Name			
BOSONAC, CRAIG			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
22721 MERIDIANA DRIVE			L				
BOC	A RATON FL 33433		83				
			84	City	FL.	85 Zip C	Code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on m familiar with, and accept the obligat	nt Florida. Such change was author	zea by	the corporation	poration submits this statement for the purpose of con's board of directors. I hereby accept the appoin	thanging its tment as req	registered gistered
	Signature, typed or printed name of registered agent			nt signature require	ad when reinstating) DATE DATE	NOCCTO	00 IN 42
12.	OFFICERS ANI		13. .1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE	PD BOSONAC, CRAIG		2 NAME				
NAME STREET ADDRESS	22721 MERIDIANA DRIVE	1		T ADDRESS			İ
CITY-ST-ZIP	BOCA RATON FL 33433		.4 CITY-5				
TITLE			1 TITLE	1 2.1		Change	☐ Addition
NAME	HULLAR, NADIA A		2 NAME				
STREET ADDRESS	22721 MERIDIANA DRIVE	2	.3 STREET	TADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433	CA RATON FL 33433 2.40		ST-ZIP	<u> </u>		
TITLE		☐ DELETE 3	.1 TITLE		,	Change	Addition
NAME		3	.2 NAME				
STREET ADDRESS		3	.3 STREE	TADDRESS			
CITY-ST-ZIP			4. CITY- 9	ST- ZIP		Change.	Addition
TITLE		_	.1 TITLE			Change	L Addition
NAME			. 2 NAME				ļ
STREET ADDRESS				TADORESS			
CITY-ST-ZIP			4 CITY-S	1-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
TITLE			2 NAME		•		
NAME				T ADDRESS			ļ
STREET ADDRESS			4 CITY-S				ĺ
CITY-ST-ZIP			1 TITLE			Change	Addition

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

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- \$T-ZIP

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

Daytime Phone #