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 # **P97000066869**

SANRIC FLORIDA, INC.

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90080 017 ***150.00

G, II II I						
Principal Place of Business		Mailing Address			1887/100: 110 1011(1807: EBSH MBHY MOH) BBH M EILIG BIYOL IBH A BSH A ANN AN	■ I
8000 BROWARD MALL. #222 PLANTATION FL 33388		8000 BROWARD MALL. #222 PLANTATION FL 33388			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
					08/01/1997	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For	_
21		26			65-0771682 Not Applicat	Эle
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	
22		City & State		.		\dashv
City & State		<u> </u>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip Country		,	This corporation owes the current year Intangible	\dashv
24	25 29 30				Personal Property Tax.	
24	9. Name and Address of Curre		100		10. Name and Address of New Registered Agent	
			81	Name		
SCH	Wartz, jodi w		82	Street Ar	ddress (P.O. Box Number is Not Acceptable)	—
6565	TAFT ST., STE. 200		"	00000		
HOL	LYWOOD FL 33024		83			
			84	City	- 85 Zip Code	\dashv
				'	FL (**) **	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the abov	e-named co	orporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered	J
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statutes	i.	allows board of directors. Thereby accept the appearance as a great	
SIGNATURE						}
	Signature, typed or printed name of registered age			nt signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	,—{
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_
TITLE	D		1.2 NAME			
NAME	CHEN, JOSEPH I			T ADDRESS		
STREET ADDRESS	8000 BROWARD MALL. #222		14 CITY-S		•	
CITY-ST-ZIP TITLE	PLANTATION FL 33388	☐ DELETE	2.1 TITLE	11-21	☐ Change ☐ Add	ition
NAME	OUEN EDIC I		2.2 NAME			-
STREET ADDRESS	CHEN, ERIC I 8000 BROWARD MALL. #222			TADDRESS		
CITY-ST-ZIP	PLANTATION FL 33388		2. 4 CiTY-5		~ ·	
TITLE	PLANTATION FL 33300	☐ DELETE	3.1 TITLE	51-2i	☐ Change ☐ Add	ition
NAME		_	3.2 NAME			
STREET ADDRESS			3.3 STREE	TADDRESS		}
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Add	ition
NAME			4. 2 NAME			- 1
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4 4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Add	ition
NAME			5.2 NAME			
STREET ADDRESS				TADDRESS		
CITY-ST-ZIP		<u> </u>	5.4 CITY-S	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Add	IUON
NAME			6.2 NAME	į		l
STREET ADDRESS			6.3 STREE	TADDRESS		1

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 conforation 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: