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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700068845

FILED May 19, 1999 8:00 am Secretary of State

05-19-1999 90022 001 *2,400.00

1. Corporation						
FDS, IN	IC.					
[,			! PROCESO ELO POREL LOPER OCALE CONLI MORA O	LINE CULE IBATA COLIA ENGLA BA	AU.
L						/
Principal Plan	ce of Business	Mailing Address		1 (25) (1652) (11) (11) (11) (11) (11) (11) (11) (1	TO THE PROPERTY OF THE PROPERT	
% BRUCE JAY TOLAND. ESO. SRUCE JAY TOLAND. ESO.			O .	- KUAKA UM221	M \$160	(Y)
801 SPICKELL AVENUE. SUITE 1501 801 BRICKELL AVENUE. SUIT			ን ፫ 1501	JIPPI TILLOCOTO		
MIAMI FL 3313	31	MINNI ET 33131		DO NOT WRITE IN THE	HIS SPACE	
				3. Date Incorporated or Qualifed		i
2 Orleans C	Place of Business	2a, Malling Address		08/07/1997 4. FEI Number 65-09-5-28	4 A-Vad Fee	
Z. Principal r	HERENIA 9400 SU(12nt Alae.		(Applied For Not Applica	
Suite, Apt		Suite, Apt. #, etc.	170 /1001	APPLIED FOR	\$8.75 Additiona	_
22	ir Fig. William	27	.•	5. Certificate of Status Desired	Fee Required	
City & Sta	Me .	City & State		6. Election Campaign Financing	\$5,00 May Be	
23 MIV			iA	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	\neg
24 334	K 25 000E	29 33186 3	DADE	Personal Property Tax.	Yes No	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Register	ed Agent	\Box
			81 Name	POUL VISASSio	_	- [
	AND BRUCE I ESO.					
~801	BRICKELL AVENUE		94	fress (P.O. Box Number is Not Acceptable)	- •	
اللككر	TE 1501		83			7
	MLFL 39131		84 City a		85 Zip Code	
	•		84 City M	iami F	L 35 Zip Code	
11, Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statutes	the above-named cor	poration submits this statement for the ourness	of changing its registere	一
office or a	registered agents or both, in the State	ie of Florida. Such change was auth nations of Section 607 0565. Florid	horized by the corporation	ion's board of directors. I hereby accept the ap	pointment as registered	
SIGNATURE		in Ohes		4-26-	-65	- 1
SIGNATURE	Signature byond or printed name of registered a		legistered Agent signature requir			ച് ഒ
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
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indicated on this annual report or supplementary annual report is true annual report as report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or of any statisment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE: