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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000077424

1. Corporation Name

## **FILED** Feb 08, 1999 8:00am **Secretary of State**

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CHANDLEH, INC	•						
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BOCA RATON FL 33432 BOCA RATON FL 33432				3. Date Incorporated or Qualifed	THOUNDE		
					09/08/1997		İ
	<u> </u>	Mailing Address			4. FEI Number	- Apr	olied For
2. Principal Place of Bus	·····	a. Mailing Address			65-0779488	. <del>   </del>	Applicable
21	26	Suite, Apt. #, etc.				\$8.75 A	
Suite, Apt. #, etc.		_ ' '		·	5. Certificate of Status Desired	Fee Re	quired
22	27	City & State			6. Election Campaign Financing	\$5.00	May Be
City & State	28	¬ ´		•	Trust Fund Contribution	Added to	
23	Country	Zip	Countr	у	8. This corporation owes the current y	ear Intangible	
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24	25   29 ne and Address of Current Rec	<u> </u>	<del>-21</del>		10. Name and Address of New Regi	stered Agent	
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DOON INTO			8-		, , , , , , , , , , , , , , , , , , , ,		
11. Pursuant to the pro- office or registered agent. I am familiar	visions of Sections 607.0502 and agent, or both, in the State of Flowith, and accept the obligations	d 607.1508, Florida Statute orida Such change was a of, Section 607.0505, Flo	es, the abo uthorized b rida Statute	ve-named cor by the corpora es.	rporation submits this statement for the pun tion's board of directors. I hereby accept th	appointment as re	gistered
SIGNATURE Signature, tyr	with, and accept the obligations and or printed name of registered agent and t	of, Section 607:0505, Flo	Registered Ag	38.	iired when reinstating)	DATE	ORS IN 12
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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.

**SIGNATURE:**