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

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90014 014 ***150.00

1. Corporation	Name # P9700	0078317			
FLICK IN	IVESTMENTS, INC.				
		Marilian Addense			jj ik 1 910) (1888 1881 1881 1881
Principal Plac	e of Business	Mailing Address			
2601 S. BAYSHORE DR., STE. 1225 2601 S. BAYSHORE DR., S COCONUT GROVE FL 33133 COCONUT GROVE FL 3313			•		
COCONUT GAC	JVE FL 33133	COCONGI GROVE FE S	0100	DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualifed	4
				09/10/1997	7,50
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	all rate			- 65-0787704	Not Applicable \$8.75 Additional
Suite, Apt.	#, etc.	27 Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ar Intangible
24	25	29	30	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registr	ored Agent
		_	81 Name	JERRY FLICK	
	IUM REGISTERED AGENTS, IN	C.	82 Street A	ddress (P.O Pox Number is Not Acceptable)	
1500 SAN REMO AVE., STE. 125				601 3. BAYSHORE	
CORAL GABLES FL 33146			83	Suite 1225	
			84 City 0.6		85 Zip Code
			1 .00	CO JUT CLEEK	FL 33133
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Stat te of Florida. Such change was	tutes, the above-named of authorized by the corpor	corporation submits this statement for the purpos ration's board of directors. I hereby accept the a	ppointment as registered
agent. I a	um fanuliar with, and accept the god	pations of, Section 607.0505, F	lorida Statutes.	2 11	4.0
SIGNATURE	X ////////////////////////////////////		OTE: Registered Agent signature re	2-3/-	4.7
12.	· / 7 / / / / / / / / / / / / / / / / /	gent and title if applicable. (NC AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	DE	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FLICK, JERRY G		1.2 NAME		
STREET ADDRESS		F 1995	1.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL 33133		1.4 CITY+ST-ZIP		
TITLE	DS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	FLICK, JACQUELINE B		2.2 NAME		
STREET ADDRESS	I	E= 1225	2.3 STREET ADDRESS	A Law Signature of Appendix Association (1997)	وموراه دور باستان والوجود
CITY-ST-ZIP	COCONUT GROVE FL 33133		2. 4 CITY-ST-ZIP		<u> </u>
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	,		3.3 STREET ADDRESS		•
CITY-ST-ZIP		<u>=</u>	3.4. CITY-ST-ZIP		Change DAJA
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	,		4.2 NAME		
STREET ADDRESS	1		4.3 STREET ADDRESS		
CITY-ST-ZIP		□ bciere	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		Clause Disagnon
NAME	}		5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE ,		_ belefic	6.2 NAME		
NAME '-r~	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 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.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE: `

STREET ADDRESS

3-31-99 305-859-8484 Obte Devime Prone #