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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90034 010 ***150.00

DOCUMENT # P9700082429

PERSON	ALLY FOR YOU, INC.			
Principal Place	of Business	Mailing Address		à tâthing) tiù tâthi nhài mait màir mhui mha indu min aird airt ann
6278 N. FEDERAL HWY. #278 6278 N. FEDERAL HWY. #278 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308			3	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/23/1997
2 Principal Pt	ace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number Applied For
<u>⊢</u> -	ace of Dusiness	26		65-0782572 Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.		\$8.75 Additional
22	, 5.5.	27		5. Certificate of Status Desired Fee Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 3	0	Personal Property Tax. ☑ Yes ☐ No
	9. Name and Address of Curren			10. Name and Address of New Registered Agent
RUBIN, STEVEN D 150 W. FLAGLER ST. MIAMI FL 33130			81 Name 82 Stree 83	Address (P.O. Box Number is Not Acceptable)
1				
			84 City	FL 85 Zip Code
agent. Las SIGNATURE	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	t, the above-named horized by the corp a Statutes.	d corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
agent. I as SIGNATURE	m familiar with, and accept the obligation of registered ager	nt and title if applicable (NOTE: R	i, the above-name horized by the corp la Statutes.	d corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
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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 suppliemental 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.

5.4 CITY-ST-ZIP

64 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

DELETE

Change

Addition