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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000082437

1. Corporation Name

## **FILED** Mar 04, 1999 8:00 am Secretary of State

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Principal Place	of Rusiness	Mailing Address	<del></del>		<del></del> [	l ladiladi ito i	EKIL KEULI BUKK U	EIII EEII)			() [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [
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					3	Date Incorporate 09/22/1997	d or Qualifed	ı			
2 Principal Pl	ace of Business	2a. Mailing Address			4	FEI Number				Apr	plied For
21	aco or Eddiness	26				- 65-0752721			٠.	<u> </u>	t Applicable
Suite, Apt. 1	# etc.	Suite, Apt. #, etc.							\$	8.75 A	dditional
22	., •	27			5.	Certifcate of Stat	tus Destred		•	Fee Re	quired
City & State	<del></del>	City & State			6	. Election Campai	an Financing		:	\$5.00	May Be
23		28			"	Trust Fund Cont	-			Added t	
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24	25		30		"	Personal Proper		•		Yes	<b>☑</b> No
	9. Name and Address of Cu		<u> </u>		10	Name and Add	ress of New	Registe	red Age	nt	
<u> </u>			81	Name						•	
	(OVITZ, EVELYN		00	<u> </u>	A d d /	D.O. Bay Mysebas	is Alet Accord	table)			
1174	0 NW 29TH PL		82	Street	Address (	P.O. Box Number	is Not Accept	lable)			
SUNI	RISE FL 33323		83	_		<del></del>				-	
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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.