## 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

## DOCUMENT # DOZOGOSECZZ

Principal Place of Business	
ARROY LINGUADU DOAD	

02-14-2000 90175 012 \*\*\* 900.00 FILED P97000085577
SECKETARY OF STATE
THISTON OF CORPORATION

00 APR -5 PM 12: 35

1. Corporation	on Name	1 1 CCCOU			
LAW AN	ID TECHNOLOGY PARTNER	S, INC.			
				4 PERIODE HIGH ARTH 12211 PRINS CONT.	1840 8800 1868) 1860 600 1880 1881 1881
Principal Plac	e of Business	Malling Address		I the common transfer common to a series and a	inter maint intal erint aveil somt enes samt
12805 HICKOR	Y ROAD	1215 E BROWARD BLVD		Maria Consultation	REALT OC A
MIAMI FL 3318	31	FT LAUDERDALE FL 3330	l	NEINO LAIED	MENTE 99-00
US				Date incorporated or Qualified	IN THIS SPACE
				10/02/1997	
2 Principal P	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
7			Ickory Road	65-0808127	Not Applicable
Suite, Apt.	. #, etc.	Sulte, Apt. #, etc.	1		\$8.75 Additional
2	•	27		5. Certificate of Status Desired	Fee Required
City & Star	te	City & Stote	: TI	6. Election Campaign Financing	- \$5.00 May Be
:3]		28 1 (2) 11 A	nu provida	- Trust Fund Contribution	Added to Fees
_ Zip	Country	- ZD 101	Country	8. This corporation owes the current	
4	[25]	29 3 2 7	30 (1)	Personal Property Tax.  10. Name and Address of New Reg	Yes DNo
	9. Name and Address of Current	t Kegisterea Agent	81 Name	/ / / **	
סידו	OOLE, WILLIAM T		<u> </u>	IEDHEN E. EVELIN	
	5 E BROWARD BLVD		82 Street Ad	tress (P.O. Box Number is Not Acceptable	a) 
FT L	AUDERDALE FL 33301		83	oos Hickory Kodd	
			84 City //	o. MIAMI	FL 85 33781
11 Pursuant	to the provisions of Sections 607.9502	2 and 607,1508, Florida Statu	les, the above-named cor	poration submits this statement for the pur	
office or r	registered agent, or both, in the State of	of Florida, Such change was a long of Section 507,0505. Flo	uthorized by the corporat	poration submits this statement for the pution's board of directors. I hereby accept the	ne appointment as registered
	V . // // .	e - Strohen	IF Kallet	The-15	1999
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOT)	: Registered Agent signature requi		DATE
12.	OFFICERS AN		13	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	PM	☐ DELETE	1,1 TITLE		□ cyteride
NAME	KRULIN, STEPHEN E		1.2 NAME	•	
STREET ADDRESS	•		1.3 STREET ADDRESS		
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MLE	}	Commit	2.1 TITLE	•	
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NAME.	1		62 NAME		
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CITY-ST-ZIP	1		8.4 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 consequence 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 is changed, or on an attachyght with an address, with all other like empowered.