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 # **P97000086431**1. Corporation Name

A N FOX, INC.

		M-01 A d t						
Principal Place of Business Mailing Address 214 SOUTH FEDERAL HIGHWAY 214 SOUTH FEDERAL HIGHWAY								
214 SOUTH FEDERAL HIGHWAY 214 SOUTH FEDERAL HIGH FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 3330							_	
					DO NOT WRITE	IN THIS SPACE		
					3. Date Incorporated or Qualifed 10/06/1997			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			65-0790800		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired			
City & State City & State					6. Election Campaign Financing	-		
23 Zip	Country	28	Country		Trust Fund Contribution 8. This corporation owes the current		ueu IO Fees	
24	25		30		Personal Property Tax.	t year intangible	□No	
47	9. Name and Address of Current	11			10. Name and Address of New Reg	istered Agent		
EOV	62	THE STATE OF THE S	81	Name				
FOX, ANDREW J 214 SOUTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33301			82	Street Add	Street Address (P.O. Box Number is Not Acceptable)			
			83	83				
			84	City		E 85	Zip Code	
				<u> </u>	poration submits this statement for the pu	<u> </u>	a ita maintana	
				nt signature require	od when reinstating). ADDITIONS/CHANGES TO OFFIC	DATE	CTORS IN 12	
TITLE	D DELETE		13.		ADDITIONS/CHANGES TO CITIC	Cha		
NAME	FOX, ANDREW J		1.2 NAME		•			
STREET ADDRESS	214 SOUTH FEDERAL HIGHWA	Υ		ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		1.4 CITY-S	T-ZIP	1,000			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Cha	inge Addition	
NAME ·	FOX, NICOLA J		2.2 NAME					
STREET ADDRESS	214 SOUTH FEDERAL HIGHWA	γ	2.3 STREET					
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	☐ DELETE	2. 4 CITY-5 3.1 TITLE	ST-ZIP		Cha	ange Addition	
TITLE	A;	□ DELETE	3.1 TITLE 3.2 NAME			ال ۱۳۰۵		
NAME STREET ADDRESS			3.3 STREE	TADDRESS			, to 8	
CITY-ST-ZIP			3.4. CITY-S			• •		
TITLE		☐ DELETE	4.1 TITLE			☐ Cha	inge 🗌 Addition	
NAME			4, 2 NAME				* J	
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP		<u> </u>	4.4 CITY-S	T- ZIP			nan Maddison	
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME			☐ Cha	inge	
NAME			5.2 NAME 5.3 STREET	TADDRESS	:			
STREET ADDRESS	ņ		5.4 CITY-S					
CITY-ST-ZIP	5 1 2 2 1	☐ DELETE	6.1 TITLE			[7] Cha	nge Addition	

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 an an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Jan 21, 1999 8:00am

Secretary of State

01-21-1999 90001 022 ***150.00

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