## 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

## May 10, 1999 8:00 am Secretary of State

05-10-1999 90089 028 \*\*\*150.00

## DOCUMENT # P97000087830

1. Corporation Name

THE BRITISH OAK INC

THE SHIT	IOTI OAK, INO.				
Principal Place	e of Business	Mailing Address			i latinath hin latin soom dank com costa latin haar later chin oost food
3281 GRIFFIN RO		3281 GRIFFIN ROAD			
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312					
			281 GRIFFIN ROAD ORT LAUDERDALE FL 33312  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 10/10/1997  2a. Mailing Address 4. FEI Number 65/0887510 Not Applied For Not Applicable Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required  City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees  Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Personal Property Tax. Personal Property Tax.  Street Address (P.O. Box Number is Not Acceptable)  81 Name 82 Street Address (P.O. Box Number is Not Acceptable)  83 84 City FL 85 Zip Code  d 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered orida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered or of, Section 607.0505, Florida Statutes.  (NOTE: Registered Agent signature required when remstating)  DATE		
2. Principal P	lace of Business	<del> </del>			45/0997510
21	-	26			Trot Applicable
Suite, Apt.	#, etc.	<b>⊢</b>			E Cortifonto of Status Decired
22 City & Stat		City & State			
·	e	<b>—</b> •			
Zip	Country		Country		
24	25		]		
24	9. Name and Address of Current				
			81	Name	
	ing, sheldon esq		-	C44 A	Address (D.O. Dest Number in Not Acceptable)
800 S	E 3RD AVENUE SUITE 300		02	SireerA	Address (P.O. Box Number is Not Acceptable)
FORT	LAUDERDALE FL 33316		83		
					Apr   75- C-4-
			84	City	FL 85 Zip Code
office or r	egistered agent, or both, in the State o	f Florida. Such change was autho	orized by	the corpor	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		100 II 4107F 0			DATE
12,	Signature, typed or printed name of registered agent OFFICERS ANI			it signature rec	Todamor Wildir Combaning)
TITLE	PTD				
NAME	JACKSON, COLIN	_			
STREET ADDRESS	3281 GRIFFIN ROAD			ADDRESS	
	FORT LAUDERDALE FL 33312			1	
CITY-ST-ZIP	S	☐ OELETE		1-2.11	☐ Change ☐ Addition
NAME	ROWAN, PAUL	_		-	
STREET ADDRESS	3281 GRIFFIN ROAD		23 STREET	ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312			1	
TITLE	TOTT ENOPERIONEE TE GOOTE	☐ DELETE	_		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	ADDRESS	
CITY-ST-ZIP			34 CITY-5	T-ZIP	
TITLE	,	☐ DELETE			Change Addition
NAME			4. 2 NAME		
STREET ADDRESS		j		ADDRESS	
CITY-ST-ZIP				i	
TITLE	<u> </u>	☐ DELETE		- 1	☐ Change ☐ Addition
NAME				1	
STREET ADDRESS			5.3 STREE	ADDRESS	

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

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

FIGH COLIDE DE ACKSON ED

□ DELETE

Change

Addition