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 # P97000087942

HARRINGTON ENTERPRISES OF SOUTH FLORIDA, INC.

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

03-04-1999 90023 025 ***150.00



Principal Place	e of Business	Mailing Address							
911 SW 9TH AVENUE 27 SANDSTONE COURT									
FT. LAUDERDAL	E FL 33315	BALTIMORE MD 21236	LTIMORE MD 21236		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifect	1			1
					10/13/1997				1
Principal Place of Business 2a. Mailing Address			~ #		A CCI Number		I A	pplied For	İ
21 4580 SW 33 40 AVE 26 75 GUL			FETREAM RO. \$02		65-0787234			ot Applicable	1
Suite, Apt.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional	1
22 DA		27 DANIA BEACH, FL		FL	5. Certifcate of Status Desired		Fee R	equired	
City & Stat		City & State	City & State		6. Election Campaign Financing	, 0	\$5.00	May Be	ŀ
23 33	333/2 USA 28 33004			VSA	Trust Fund Contribution	<u></u>	Added	to Fees	1
Zip	Country	Zip	Country	/	8. This corporation owes the cu	rrent year Inta			
24	25	29 30			Personal Property Tax.		☐Yes	Mo No	1
	9. Name and Address of Current	Registered Agent		т	10. Name and Address of New	Registered /	Agent		1
	DINOTON I COCCULT		81	Name	JOSEPH T. HARA	21N9TI	9∧¢		
HARRINGTON, JOSEPH T				Street Addre	ss (P.O. Box Number is Not Accep	table)			1
911 SW 9TH AVENUE			83	75	GULF STREAM R	D #3	<u> </u>		1
FT. LAUDERDALE FL 33315				100	NIA BECK				
			84		THE TOURS			Code	1
						<u>FL</u>		3004	1
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes,	the abov	e-named corpo	ration submits this statement for the	e purpose of a	changing its atment as re	s registered egistered	
agent. I a	m familiar with, and accept the obligation	Section 607.0505, Florida	Statutes	3.	To board of directors. Thereby abo			- g	
SIGNATURE	Joseph T Harring	No 2050A	1 7.	HARRIM	UGTON		11-99		
	Signature, piped of printed name of registered agent			nt signature required	when reinstating) ADDITIONS/CHANGES TO O	DATE	O DIRECT	ÕDS IN 12	ł
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO O	FFICERS AN	Change	Addition	┨
TITLE	D	☐ DELETE	1.1 TITLE				☐ Change		
NAME	HARRINGTON, JOSEPH T		1.2 NAME						i
STREET ADDRESS	911 SW 9TH AVENUE	4DDAESS (HANGE		TADDRESS					1
CITY-ST-ZIP	FT. LAUDERDALE FL 33315	DELETE	1.4 CITY-S	ST-ZIP			Change	Addition	1
TITLE		Do # 202	2.1 TITLE				Change		
NAME	75 GULF GREAM DANIABEACH, FL	NO # 302	2.2 NAME						
STREET ADDRESS	DANIABEACH, FL	33004		TADDRESS					
CITY-ST-ZIP	7,7,7,7		2. 4 CITY-				~[:] Channe	Addition	1
TITLE		DELETE~	3.1.TITLE			- <u></u> ,			
NAME			3.2 NAME						
STREET ADDRESS				TADDRESS					
CITY-ST-ZIP		□ perete	3.4. CITY-	ST-ZIP			Change	Addition	$\frac{1}{2}$
TITLE		☐ DELETE	4.1 TITLE						
NAME			4.2 NAME						
STREET ADDRESS			i	TADDRESS					1
CITY-ST-ZIP		[] perett	4.4 CITY-5	ST-ZIP			☐ Change	Addition	1
TITLE		☐ DÉLETE	5.1 TITLE	ļ					
NAME			5.2 NAME	l					
STREET ADDRESS				TADORESS					
CITY-ST-ZIP		□ octore	5.4 CITY-S 6.1 TITLE	51-ZIP			Change	Addition	1
TITLE		☐ DELETE					□ citalige	I'' Addition	
NAME			6.2 NAME						
STREET ADDRESS				TADDRESS					1
0001 07 710	I		64 CITY-5	ST-7IP					1

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.

SIGNATURE: