Apr 07, 1999 8:00 am Secretary of State

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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 # P97000089698

1. Corporation Name

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

E A COETHARE CORR

) 3.E.A. 31	OF I WARE CORF.									
Principal Place	of Business		Mailing Address		_			1011 0 1 111		
757 SE 17TH STREET. #437 FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316						DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed 10/17/1997			
2. Principal Pl	ace of Business	2:	a. Mailing Address				4. FEI Number	L A	pplied For	1
21		26					65-0818712		ot Applicable	4
Suite, Apt.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional lequired	
City & State			City & State		-		6. Election Campaign Financing	\$5 00	May Be	7-
22 City & State	6	28	1			- 			to Fees]
Zip	Country		Zip Coul				8. This corporation owes the current year Intangible Personal Property Tax.			ĺ
24	[24] <u> </u>			iu	_		10. Name and Address of New Registered Agent			
Name and Address of Current Registered Agent						Name	to, Marile and Address of New Registered Age.			1
WEISSMAN-BERMAN, DEBORAH 1350 RIVER REACH DR., #308 FT. LAUDERDALE FL 33315					81 82 83					
					84	City	FL 85 Zip Code			
l office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	a of Ho	rida. Such change was aut	norized	ı nv	the corpora	rporation submits this statement for the purpose of char tion's board of directors. I hereby accept the appointment	nging it ent as r	s registered egistered	
SIGNATURE							(red when reinstation) DATE			
	organis () production of the contract of the				Agen	t signature requ	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	OFFICERS AND DIRECTORS		-	13.			Change		1	
TITLE	D DELETE			1	1.1 TITLE			onungo		
NAME	**************************************				1.2 NAME					
STREET ADDRESS	1000 111 211 12 1011 2111 11 11				1.3 STREET ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33315			_	TY-S	T-ZIP		Channa	- Addition	┨,
TITLE	1		☐ DELETE	2.1 TI	πE		Ц	Change	Addition	
NAME				2.2 N						
STREET ADDRESS	2.3				2.3 STREET ADDRESS					1
CTY-ST-ZIP-						T-ZIP		Change	☐ Addition	午
TITLE			☐ DELETE	3.1 TI	πE		Ш	Change	Monitors	İ
NAME				3.2 N						
• • • • • • • • • • • • • • • • • • • •					3.3 STREET ADORESS					}
					3.4. CITY-ST-ZIP			Change	Addition	1
TITLE			☐ DELETE	4.1 Π				unange	L'1 Waainon	
NAME				4. 2 N	IAME	ì				1

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 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 chapged, or on an attachment with an address, with all other like empowered.

4.3 STREET ADORESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE: 스

☐ Change

☐ Change

Addition

☐ Addition