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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000090994

1. Corporation Name

Principal Place of Business	Mailing Address
526 FORESTVIEW DR	526 FORESTVIEW DR
ATLANTIS FL 33462	ATLANTIS FL 33462

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90090 020 ***150.00

7 (7)	BIERNBAUM REAL ESTATE	CO., INC.			
	•				
Principal Place	of Business	Mailing Address		T (DELIDER TO THE COURT DEST DEST DEST	i idist adila lässa sassi 8501 1801
526 FORESTVIE		526 FORESTVIEW DR			
ATLANTIS FL 3		ATLANTIS FL 33462			
				DO NOT WRITE IN THIS	S SPACE
	•			3, Date Incorporated or Qualifed	}
	·			10/21/1997	
_ ^^-	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
	Lake Worth Road	26 3850 Lake Wo	orth Road	NOT APPLICABLE 65-08711	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 #1	<u> </u>	21 "			
City & State		City & State	. 22461	6. Election Campaign Financing	\$5.00 May Be
	North, FL 33461	28 Lake Worth, F		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	tangible ☑Yes □No
24 33461	25 USA	29 33461 3	ol USA	Personal Property Tax. 10. Name and Address of New Registered	
	9. Name and Address of Currer	it Registered Agent	81 Name	10. Name and Address of New Registered	Agent
RIFR	NBAUM, RALPH		Oi Name		
	FORESTVIEW DR		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	ANTIS FL 33462		83		
7	W1110 1 E 00 10E		83		
			84 City	FL	85 Zip Code
					f shanning its societored
l office or re	ecietored agent or both in the State	of Florida, Such change was aut	horized by the comora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appo	intment as registered
agent. I ai	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	la Statutes.	• • • • • • • • • • • • • • • • • • • •	-
SIGNATURE					
	Signature, typed or printed name of registered age		epistered Agent signature requi		
12.	OFFICERS AN				
		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 ☐ Change ☐ Addition
TITLE NAME	d Biernbaum, ralph			ADDITIONS/CHANGES TO OFFICERS A	
	D BIERNBAUM, RALPH 526 FORESTVIEW DR		1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR