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PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P9700091485

FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90188 008 ***150.00

1. Corporation	Name			1-100				===				
TURBAR												
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Principal Place		ss		ailing Address								
7280 Palmetto Ste 205-n	D PARK RD			80 w palmetto park e 205-n	RD							
BOCA RATON FL 33433 BOCA RATON FL 33433								DO NOT WRITE IN THIS SPACE				
US US								3. Date Incorporated or Qualifed				
L								10/21/1997				}
2. Principal Place of Business			<u> </u>	2a. Mailing Address				4. FEI Number			Need For	
Suite, Apt. #, etc.			26	Suite, Apt. #, etc.				65-0789168		Not Applicable \$8.75 Additional		
	#, etc.		27	Suite, Apr. #, etc.				5. Certifcate of Status Desired		Fee Rec		
City & State	 —		21	City & State				6. Election Campaign Financing		\$5.00 N	May Be	
23			28	•				Trust Fund Contribution		Added to	•	
Zip		Country		Zip	Cou	intry		8. This corporation owes the curre	ent year Inta			
24		25	29		30			Personal Property Tax.			□No	
	9. Name	and Address of Cur	rent Regis	stered Agent		81	Nome	10. Name and Address of New R	egistered /	Agent		
IUM	NG TEDDI	1				°'	Name		_			•
JOHNS, TERRI L 7280 W PALMETTO PARK RD						82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
STE 205N							_					-
	A RATON	FL 33433				83				· · · · · · · · · · · · · · · · · · ·		
						84	City		FL	85 Zip C	ode	
11. Pursuant	to the provi	sions of Sections 607 (0502 and 6	07:1508, Florida Statut	es, the a	bove	named corpo	ration submits this statement for the	purpose of	changing its r	egistered ==	
) office or re	egistered ac	gent, or both, in the Sta rith, and accept the obl	ate of Florid	da. Such change was a	utnonze	o by t	the corporation	n's board of directors. I hereby accep	it trie appoir	ilment as reg	Isleied	
		itil, and accept the op	nganone or	, Section 607.0505, Fio	ilua Siai	utes.						1)
SIGNATURE				•								
SIGNATURE		d or printed name of registered	agent and title	if applicable. (NOTE	Registered		t signature required		DATE EICERS AN	D DIRECTOR		(86
SIGNATURE	Signature, types		agent and title	if applicable. (NOTE	Registered	d Agent	signature required	when reinstating) ADDITIONS/CHANGES TO OFF		D DIRECTOR	RS IN 12	11/98)
SIGNATURE 12. TITLE	Signature, types	d or printed name of registered OFFICERS	agent and title	if applicable. (NOTE	Registered	J Agent	signature required					34 (11/98)
SIGNATURE 12. TITLE NAME	Signature, types D BECK, J	d or printed name of registered OFFICERS	agent and title	if applicable. (NOTE	13. 1.1 TI	Agent TLE AME	signature required					E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS	D BECK, J. 7280 W	d or printed name of registered OFFICERS	agent and title	if applicable. (NOTE	13. 1.1 TI 1.2 N 1.3 S	Agent TLE AME	ADDRESS					R2E034 (11/98)
SIGNATURE 12. TITLE NAME	D BECK, J. 7280 W	OFFICERS AN S PALMETTO PK RD,	agent and title	if applicable. (NOTE	13. 1.1 TI 1.2 N 1.3 S	TLE AME TREET	ADDRESS					CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECK, J. 7280 W BOCA R.	OFFICERS AN S PALMETTO PK RD, ATON FL 33433	agent and title	if applicable. (NOTE CTORS DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C	TLE AME TREET	ADDRESS			☐ Change	Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE	: Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	TLE AME TREET / TTLE TREET / TTLE AME	ADDRESS			☐ Change	Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N	13. 1.1 TI 1.2 N 1.3 S 1.4 CI 2.1 TI 2.2 N 2.3 S 2.4 C	TLE AME TTY-ST- TLE AME TREET /	ADDRESS -ZIP ADDRESS			☐ Change	Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 TI	J Agent TLE AME TREET / TLE AME TREET / TREET / TREET /	ADDRESS -ZIP ADDRESS			☐ Change	Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 TI 3.2 N	TLE AME TREET TLE AME TREET TLE TREET TREET TLE TREET TLE TREET	ADDRESS -ZIP ADDRESS 1-ZIP			☐ Change	Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N	13. 1.1 TI 1.2 No 1.3 S 1.4 C 2.1 TI 2.2 No 2.3 S 2.4 C 3.1 TI 3.2 No 3.3 S	TLE AME ITY-ST- TILE AME ITREET/ ITY-ST TILE AME ITREET/ ITLE AME	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS ADDRESS			☐ Change	Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N DELETE	13. 1.1 TI 1.2 Ni 1.3 S 1.4 C 2.1 TI 2.2 Ni 2.3 S 2.4 C 3.1 TI 3.2 Ni 3.3 S 3.4. C	TILE AME ITY-ST TILE AME ITREET ITY-ST TILE AME ITREET AME ITREET AME	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS ADDRESS			☐ Change	Addition	CR2E034 (11/98)
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N DELETE	13. 1.1 TI 1.2 No. 1.3 S' 1.4 CC 2.1 TI 2.2 No. 2.3 S' 2.4 CC 3.1 TI 3.2 No. 3.3 S' 3.4 CC 4.1 TI 4.2 No.	ITLE AME ITREET ITY-ST ITLE AME ITREET ITLE AME ITREET ITLE ITREET ITLE ITREET ITLE	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS 5-ZIP			☐ Change ☐ Change ☐ Change	Addition Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N DELETE	2.4 C 3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N 4.3 S 4.5 C 4.1 TI 4.2 N 4.3 S 4.5 C 4.1 TI 4.2 N 4.3 S 5.5 C 6.5 C 6.	ITLE AME ITREET ITY-ST ITLE AME ITREET ITLE AME ITREET ITLE ITREET ITLE ITREET ITLE	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 5-ZIP			☐ Change ☐ Change ☐ Change	Addition Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	if applicable. (NOTE COTORS DELETE N DELETE N DELETE	2.4 C 3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N 4.3 S 4.5 C 4.1 TI 4.2 N 4.3 S 4.5 C 4.1 TI 4.2 N 4.3 S 5.5 C 6.5 C 6.	TILE AME TREET / TILE AME TREET / TILE AME TREET / TILE TREET /	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 5-ZIP			☐ Change ☐ Change ☐ Change	Addition Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	If applicable. (NOTE COTORS DELETE N DELETE N DELETE	23 S 2 4 C 4.1 TI 4.2 N 4.3 S 4.4 C 4.4 C 1.5 TI 5.5 TI 6.5 TI 6.	TLE AME ITY-ST TLE AME ITREET ITLE AME ITREET ITLE	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 5-ZIP			☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	If applicable. (NOTE COTORS DELETE N DELETE N DELETE	2.1 TI 22 N/ 2.3 S' 2.4 C 3.1 TI 4.2 N/ 3.3 S' 3.4 C 4.1 TI 4.2 N/ 4.3 S' 4.4 C 5.1 TI 5.2 N/ 5.3 S'	I Agent TLE AME TREET // TREET	ADDRESS -ZIP ADDRESS 1-ZIP ADDRESS 5-ZIP ADDRESS -ZIP ADDRESS			☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BECK, J. 7280 W BOCA R. D JOHNS, 7280 W	OFFICERS OFFICERS AN S PALMETTO PK RD, ATON FL 33433 TERRI L PALMETTO PK RD,	AND DIRE	If applicable. (NOTE COTORS DELETE N DELETE N DELETE OELETE	23 S 2 4 C 3.1 TI 4 2 N 4.3 S 4.4 C 5.1 TI 5.2 N 5.3 S 5.4 C 5.2 TI 5.2 N 5.3 S 5.2 TI 5.2 N 5.2 TI 5.2 TI 5.2 N 5.2 TI 5.2 N 5.2 TI	I Agent TLE AME TREET TILE AME TREET TILE AME TREET TILE TREET	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 5-ZIP ADDRESS 5-ZIP			☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition Addition	CR2E034 (11/98)
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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:

OF SIGNING OFFICER OR DIRECTOR