## 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** 

## CUMENT # P97000092762

D REPORTING, INC.

## **FILED** Sep 09, 1999 8:00 am Secretary of State

09-09-1999 90006 037 \*\*\*550.00



						Beard fabr fabr
Place of Business	Mailing Address					
ST STREET #8	495 NW 41ST STREET #8 OAKLAND PARK FL 33309					
PARK FL 33309			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed		<del></del>
				10/27/1997		
pal Place of Business.	2a. Mailing Address			4. FEI Number	Ar	plied For
15 SW 15th Street		as B	ox á	65-0791224	<del></del>	t Applicable
Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional
ot. D-203	27			5. Certificate of Status Desired	Fee Re	equired
State	City & State			6. Election Campaign Financing	\$5.00	May Be
noaro Beach. HL	28			Trust Fund Contribution	Added	to Fees
Country	Zip	Country	1	8. This corporation owes the current ye		_
0069 25 USA	29	30		Personal Property Tax.	Yes	□No
9. Name and Address of Curren	t Registered Agent		<del>-</del>	10. Name and Address of New Regist	ered Agent	
NAME DUTLE &		81	Name			
DAVIS, RUTH A		82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
195 NW 41ST STREET #8			·			
DAKLAND PARK FL 33309		83				
•		84	City		85 Zip	Code
			Oity		FL   "	
Signature, typed or printed name of registered agen			nt signature requ	ired when reinstating)  DA  ADDITIONS/CHANCES TO DESIGE		NRS IN 12
OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICER	Change	Addition
D DAME DUTH A	☐ DELETE	1.1 TITLE	1	Duste Duth A.	<b>*</b>	
DAVIS, RUTH A		1.2 NAME		Davis, Kuth A. tols sw 15th St. #D	-203	
RESS 495 NW 41ST STREET #8			TADORESS 6	Doman Panch F	Z 3306	<b>,</b> q
OAKLAND PARK FL 33309	☐ DELETE	1.4 CITY-S 2.1 TITLE	11-214	POMPLUIO PROCE, I	☐ Change	☐ Addition
·	- Drrrie	2.7 IIILE 2.2 NAME	ļ		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	
	•		T ADDRESS			
RESS		2.3 STREE				
	☐ DELETE	3.1 TITLE	31-21		☐ Change	Addition
	<u>_</u>	3.2 NAME	ļ			
RESS			T ADDRESS			
		3.4. CITY-5	- 1			
	☐ DELETE	4.1 TITLE			☐ Change	Addition
i		4. 2 NAME	-			
RESS		4.3 STREE	T ADORESS			
1		4.4 CITY-S				
	☐ DELETE	5.1 TITLE			Change	Addition
<b>!</b>		5.2 NAME	}			
RESS		5.3 STREE	TADDRESS			
Service Control of the Control of th		5.4 CITY-S	T-ZIP			
AND THE PROPERTY OF	☐ DELETE	6.1 TITLE			☐ Change	Addition
		6.2 NAME				
RESS		6.3 STREE	TADDRESS			
		64 CITY-S	T. 7IP			

preby 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 icated 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 over 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 other 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

954917-9453