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 # P97000098901 1. Corporation Name

CEO AMERICA, INC.

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90035 031 ***150.00



Principal Place of Business Mailing Address							1 (401(401 119 19)11 19011		21 12110 1311	66,9111871007
407 LINCOLN ROAD. #5B 407 LINCOLN ROAD. #5B MIAMI BEACH FL 33139 MIAMI BEACH FL 33139							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
							11/17/1997			
2. Principal P	lace of Business	2a. Mailing A	ddress			,	4. FEI Number		Ap	plied For
21	•	26					65-0805412		No	t Applicable
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.				. 5. Certifcate of Status Desired		\$8.75	Additional
22		27	27				Ver Certificate of Claims Desired	<u></u>	Eee.Re	equired==
City & State	e	⊢ '	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zip		Cou	ntry		8. This corporation owes the currer	nt year Intar	ngible	
آهر	25	29	30	0			Personal Property Tax.		Yes	□No
	9. Name and Address of Curren		nt	·			10. Name and Address of New Re	gistered A	gent	
	i.				81	Name				
	LICY. LUCY M				82	Stroot Address	ss (P.O. Box Number is Not Acceptab	le)		
407 LINCOLN ROAD, #5B						Sileet Addres	33 (1 .O. DOX Halliber to Not 7 tocopied			
MIAN	WI BEACH FL 33139				83		***			
	•					= :.			ine Zin i	Code
	÷		·		84	City		FL	85 Zip (2008
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such c	hange was auth	norized	i by th	named corpor ne corporation	ration submits this statement for the p i's board of directors. I hereby accept	urpose of cl the appoint	nanging its ment as re	registered gistered
SIGNATURE										
	Signature, typed or printed name of registered ager		(NOTE: Re	-	Agent s	agnature required v		DATE	DIDECTO	DC IN 12
12.	, , , , , , , , , , , , , , , , , , , 	ID DIRECTORS	722	13.		1	ADDITIONS/CHANGES TO OFFI			Addition
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NAME	SUPLICY, LUIS		i i		2 NAME			'		
STREET ADDRESS	407 LINCOLN ROAD, #5B			1.3 ST	REETA	DDRESS	•			
CITY-ST-ZIP	MIAMI BEACH FL 33139				TY-ST-	ŽΙΡ			F**1 Ch	- Addition
TITLE	•	· L	DELETE	2.1 17	īΕ				Change	Addition
NAME				2.2 NA	ME					
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NAME				6.2 N	AME					
STREET ADDRESS				6.3 ST	REET A	DDRESS				
CITY ST 7ID		•		6.4 CI	TY-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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: