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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000099958

IMP HIDITED DOODEDTIES INC

Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90069 009 ***150.00

J.I.L J.J.	TIEN PHOPERIIES, INC.											
Principal Place	e of Business	Mailing Address				\neg	I CEMEŞBUL ŞIM CMELL YARK	1 08511 49115 BA	1111 40 110 1	WIN (8118)	#1#1 #11	m: 1811 188)
104 LIGHTHOUSE DRIVE TEQUESTA FL 33469		104 LIGHTHOUSE DRIVE TEQUESTA FL 33469					DO NO	T WRITE	IN THIS	SPACE		
						ļ	 Date incorporated or Q 11/24/1997 	ualifed				
2. Principal Pl	lace of Business	2a. Mailing Address					4. FEI Number				Appli	ed For
21		26					APPLIED FOR				Not A	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired						
City & State	е	City & State					6. Election Campaign Fina	- 1	j `			ay Be
23		28					Trust Fund Contribution				ed to	rees
Zip	Country	Zip	30	ountry		İ	This corporation owes to Personal Property Tax.		year into	angible Yes]No
24	25	t Registered Agent	30	-			10. Name and Address of		istered			-
• •	9. Name and Address of Curren	Kegistered Agent		81	Name		TO: Hallio and Address of			.5		
KRAI	MER, SCOTT ESQ.											
	WEST INDIANTOWN ROAD			82	Street A	Addres	s (P.O. Box Number is Not	Acceptable)			
	E 200			83	-							
	TER FL 33458											
33 , 1				84	City				FL	85 2	їр Со	de
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	of Florida. Such change was a	uthoriz	ed by	the corno	oration's	s board of directors. I hereb	v accept th	ie appoii	ntment as	regis	terer l
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fig	orida St	atutes.					DATE			
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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 feiting 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 cate that my annual report or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my annual supplemental supplemental that my annual report is true and accurate and that my signature shall have the same legal effect as if made under supplemental that my annual report is true and accurate and that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under supplemental that my signature shall have the same legal effect as if made under shall have the same legal effect as if made under shall have the same legal eff

SIGNATURE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR