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 # **P97000100432**

1. Corporation Name

INTRACC	JASTAL SIDE APARTMENTS	5, INU.						
Principal Place	- (D	Mailin Addana		- -	I IBDIHBU HU IDDIH UBIH UBIH UBIH		III UUIII BIUUU I	
		Mailing Address 3011 N OCEAN DR						
3011 N OCEAN DR HOLLYWOOD FL 33019 HOLLYWOOD FL 33019								
US US					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					11/21/1997			1
2 Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number		App	lied For
—¬ ·	add of Browness	26			13-8721131		<u> </u>	Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$8.75 AG	
⊢ ¬	m, 010.	27			5. Certifcate of Status Desired		Fee Req	
22 City & State	<u> </u>	City & State			6. Election Campaign Financing		\$5.00 N	Jan Ba
<u></u>	.	28		-	Trust Fund Contribution		Added to	· 1
Zip	Country	Zip	Country		8. This corporation owes the current	nt vear Inter		
— '	[25]	-	30		Personal Property Tax.			⊒No .
24	9. Name and Address of Curren	 	30 ₁		10. Name and Address of New Re			
	5. Hame and Address of Curren	it regionited rigoni	81	Name	10. 11		<u> </u>	
BRIE	N, JOSEPH		L					
	HARRISON ST., SUITE 212		82	82 Street Address (P.O. Box Number is Not Acceptable)			. 1	
	LYWOOD FL 33020	-	83	 		<u>·</u>		
1100			03					1
			84	City			85 Zip Ci	ode
						FL_	<u> L.L.</u>	
office or re	egistered agent, or both, in the State	of Florida. Such change was aut	thorized by	the corpor	corporation submits this statement for the pration's board of directors. I hereby accept	urpose of cl the appoint	hanging its r ment as regi	egistered istered
anent La	m familiar with land accept the obliga	itions of Section 607 0505. Florid	da Statutes	•				I
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flori	da Statutes	S .				
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flore		5.	quired when reinstating)	DATE		
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flore		5.	quired when reinstating) ADDITIONS/CHANGES TO OFF		DIRECTOR	RS IN 12
agent. I a	m familiar with, and accept the obliga	nt and title if applicable. (NOTE: F	Registered Age	5.		CERS AND	DIRECTOR	RS IN 12
agent. I all SIGNATURE	m familiar with, and accept the obligation of th	nt and title if applicable. (NOTE: F ID DIRECTORS	Registered Age	5.		CERS AND		
agent. I as SIGNATURE 12. TITLE NAME	m familiar with, and accept the obligation of th	nt and title if applicable. (NOTE: F ID DIRECTORS	13. 1.1 TITLE 1.2 NAME	5.		CERS AND		
agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and title if applicable. (NOTE: F ID DIRECTORS	13. 1.1 TITLE 1.2 NAME	nt signature rec		CERS AND		
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the obligation of th	nt and title if applicable. (NOTE: F ID DIRECTORS	13. 1.1 TITLE 1.2 NAME	nt signature rec		ICERS AND		
agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and title if applicable. (NOTE: F ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	nt signature rec		ICERS AND	Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and title if applicable. (NOTE: F ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	T ADDRESS		ICERS AND	Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and title if applicable. (NOTE: F ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	T ADDRESS		ICERS AND	Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and two if applicable. (NOTE: F ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-I	T ADDRESS		CERS AND	Change	☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and title if applicable. (NOTE: F ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-I 3.1 TITLE	T ADDRESS		CERS AND	Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and two if applicable. (NOTE: F ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS		CERS AND	Change	☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and two if applicable. (NOTE: F ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS T ADDRESS T ADDRESS T ADDRESS		CERS AND	Change	☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Intions of, Section 607.0505, Floridation of Applicable (NOTE: FIND DIRECTORS) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S	T ADDRESS T ADDRESS T ADDRESS T ADDRESS		CERS AND	Change Change Change	Addition Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	nt and two if applicable. (NOTE: F ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE	T ADDRESS T ADDRESS T ADDRESS T ADDRESS ST-ZIP		CERS AND	Change	☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Intions of, Section 607.0505, Floridation of Applicable (NOTE: FIND DIRECTORS) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP ST ADDRESS ST-ZIP ST ADDRESS ST-ZIP		CERS AND	Change Change Change	Addition Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Intions of, Section 607.0505, Floridation of Applicable (NOTE: FIND DIRECTORS) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS ST-ZIP		CERS AND	Change Change Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Internal of the if applicable (NOTE: FIGURE TORS) DELETE DELE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS T ADDRESS T ADDRESS ST-ZIP T ADDRESS ST-ZIP		ICERS AND	Change Change Change Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Intions of, Section 607.0505, Floridation of Applicable (NOTE: FIND DIRECTORS) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE	T ADDRESS T ADDRESS T ADDRESS ST-ZIP T ADDRESS ST-ZIP		ICERS AND	Change Change Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Internal of the if applicable (NOTE: FIGURE TORS) DELETE DELE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	T ADDRESS T ADDRESS T ADDRESS ST-ZIP T ADDRESS ST-ZIP		ICERS AND	Change Change Change Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Internal of the if applicable (NOTE: FIGURE TORS) DELETE DELE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS T ADDRESS T ADDRESS ST-ZIP T ADDRESS ST-ZIP		ICERS AND	Change Change Change Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Internal of the if applicable (NOTE: FIGURE TORS) DELETE DELE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.4 CITY-S 5.5 TITLE 5.7 NAME 5.8 STREE 5.8 CITY-S 5.8 TITLE 5.8 NAME 5.9 STREE 5.9 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS T ADDRESS T ADDRESS ST ZIP T ADDRESS ST ZIP T ADDRESS ST ZIP		ICERS AND	Change Change Change Change Change	Addition Addition Addition
Agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN P DAN KENNEDY 3011 N OCEAN DR	Internal of the if applicable (NOTE: FIGURE TORS) DELETE DELE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE	T ADDRESS T ADDRESS T ADDRESS ST ZIP T ADDRESS ST ZIP T ADDRESS ST ZIP		ICERS AND	Change Change Change Change	Addition Addition

14. I hereby certify that the information supplied with this filling 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 conforation 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 charged or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

May 03, 1999 8:00 am Secretary of State

05-03-1999 90099 027 ***150.00