FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000102969

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90108 016 ***150.00

A&PTF	RUCK BROKERS, INC.								
Principal.Place	of Business	Mailing Address					99117 02107 11011		311.9 1911 1901
7070 N.W. 81ST TERRACE 7070 N.W. 81ST TERRACE									
PARKLAND FL 33067 PARKLAND FL 33067						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualife			
						12/03/1997			ļ
2. Principal Place of Business 2a. Mailing Address				-		4. FEI Number		A	plied For
26						65-0802813	35-0802813 Not Ap		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5 Certificate of Status Desired \$8.75 Additions			
27						Fee Required			
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	ntry		8. This corporation owes the co	urrent year Int	_	□No
24	25	29	30	<u> </u>		Personal Property Tax. 10. Name and Address of Nev	Ponietered	☐ Yes	
	9. Name and Address of Cur	rent Registered Agent		81	Name	10. Name and Address of New	* Kegiatered	- Agent	
WEFI	KLEY, FAYE	•							[
	AUBURN RD.		82 Street Add			ss (P.O. Box Number is Not Acce	ptable)		
	STVIEW FL 32539			83					
OI LE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				_				
				84	City		FL	[85] Zip	Code
SIGNATURE	n familiar with, and accept the obling familiar with, and accept the obline familiar with a second control of th				signature required	when reinstating) ADDITIONS/CHANGES TO	DATE	ND DIRECTO	 DRS IN 12
TITLE	P	DELETE	1.1 TI	TLE		ADDITIONO/OFFATOEO /O	311 <u>10</u> 2.10 / <u>"</u>	☐ Change	Addition
NAME	LOCKE, JOEY V	_	1.2 N	AME.					
STREET ADDRESS	7070 NW 81ST TERR		1.3 \$1	REET A	ADDRESS				{
CITY-ST-ZIP	PARKLAND FL		ŀ	TY-ST-					
TITLE	774412412	DELETE	2.1 Π					☐ Change	Addition
NAME			2.2 N	AME					
STREET ADDRESS			2.3 ST	REET A	ADDRESS				
CITY-ST-ZIP	an commence that is	-	2.4 C	ITY-ST	-ZIP				
TITLE		☐ DELETE	3.1 TI	TLE				☐ Change	☐ Addition
NAME			3.2 N	AME]				ļ
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TITLE		☐ DELETE	4.1 TI	TLE				Change	☐ Addition
NAME			4. 2 N	AME	j				
STREET ADDRESS			4.3 ST	REET	ADDRESS				ļ
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STREET ADDRESS					ADDRESS	•			
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TITLE		☐ DELETÉ	6.2 N				•		
NAME	•, •				ADDRESS				,
STREET ADDRESS			0.3 5	UZEL)	ADURESS			•	ı

CITY-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.

6.4 CITY-ST-ZIP