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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

**FILED** 

Feb 01, 1999 8:00am

**Secretary of State** 

02-01-1999 90001 034 \*\*\*150.00

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000105824

1. Corporation Name

FRANCENTRAL II, INC.

570000KEECHOE	of Business	Mailing /				, , , , , , , , , , , , , , , , , , ,		
	,		CUTIVE CIRCLE					
WEST PALM BE	ACH FL 33414	BOYNTO	N BEACH FL 33436-	1835		DO NOT WRITE IN THE	S SPACE	
US	•					3. Date Incorporated or Qualifed	-	
		,				12/16/1997	•	
•							Appli	ied For
2 Principal Pla	ace of Business	2a. Mail	ing Address			4. FEI Number		
Z. Fillicipari s		26				65-0807449		Applicable
21	H oto		e, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ad	I
Suite, Apt. #	#, etc.	27	. ,			5. Certificate of Citation Decision	Fee Requ	uireo
2			& State	<del> </del>		6. Election Campaign Financing	<b>\$5.00</b> м	
City & State	g* wa =+	— ·		•		Trust Fund Contribution	Added to	Fees
23		28     Zip		Country	<del>, .</del>	8. This corporation owes the current year	ntangible	
Zip	Country	_ <del> </del>		<b>-</b> ' ′		Personal Property Tax.	☐ Yes 🖺	]No
24	25	29		30		10. Name and Address of New Registere	d Agent	
	9. Name and Address of Current	t Registered	d Agent	81	Name	10: (32110		
			********	101		<u>•                                      </u>		
CER	VIERI, JOSEPH	,		82	Street Add	dress (P.O. Box Number is Not Acceptable)		٠, \
	EXECUTIVE CIRCLE			1	<u> </u>	the second of th	n tile state i de la compania del compania de la compania del compania de la compania del la c	15 15 Sept 1 125
BOY	NTON BEACH FL 33436-1835			83	3		<b>阿瑟斯斯 建</b> 列	
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	et la grande de la g			84	1	F	L   ' '	1.
Barbara Const	Algebra of the control of the contro	- 100 g	FOO Fly ide Chatuta	a the abou		rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its r	egistered
11. Pursuant	to the provisions of Sections 607.050	2 and 607.13 of Florida, S	Such change was au	thorized by	the corpora	tion's board of directors. I hereby accept the ap	pointment as regi	stereo
office of r	registered agent, or both, in the State in familiar with, and accept the obligation	tions of, Sec	ction 607.0505, Flori	ida Statute	S.	*		`
=	•		•			DATE DATE	• • • •	
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if anoli	(NOTE.	D A	ant ekingture remi			
		it and tho a appa			ant agriculture rode	DATE	AND DIRECTOR	RS IN 12
12	OFFICERS AN	ID DIRECTO	ORS	13.	ent agriculture requ	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
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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 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 opporation or the preceiver of truesee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter (or on an other proportion) and the proportion of the proportion officer or director of the Block 12 or Block 13 if of

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE NAME

STREET ADDRESS