## 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 # P97000108160

1. Corporation Name

MIRAMAR TRADING HOUSE, INC.

Principal Place of Business

Mailing Address

## **FILED** Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90199 042 \*\*\*158.75



909 SW 21 ST VEST HOLLYWOOD FL 33023	5909 SW 21 ST WEST HOLLYWOOD FL 33023			DO NOT WRITE IN THIS SPACE				
				3. Date incorporated or Qualifed 12/26/1997				
Principal Place of Business     2a. Mailing Address				4. FEI Number		Appl	lied For	
1 6151 MIRAMAR PARKWAY	26 6151 MIRAMAR P	ARE	KWDV	65-0817065		Not	Applicable	
Suite, Apt. #, etc.  2 SUITE AI 22 TORTON 27 SUITE 122				5. Certifcate of Status Desired	<b>X</b>	<b>\$8.75</b> Ad Fee Req		
City & State  3 MTRAMAR FLORIDA	City & State	OR.	IDA.	Election Campaign Financing     Trust Fund Contribution		<b>\$5.00</b> M Added to	-	
Zip Country 4 33023 25 U.S.A	Zip Cou	Intry		This corporation owes the curre     Personal Property Tax.	ent year Int		□No	
9. Name and Address of Current				10. Name and Address of New R	egistered	Agent		
ROBBINS, ROSE J.D			Name			,		
1500 N. OCEAN BLVD., #601			Street Address (P.O. Box Number is Not Acceptable)					
POMPANO BEACH FL 33062		83						
			City		FL	85 Zip Co		
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, the a	bove-i	named corpo	pration submits this statement for the	purpose of	changing its regi	egistered istered	

office or registered agent, or both, in the State of Florida. Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE										
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN							
TITLE	PVST	DELETE	1.1 TITLE	PVST		•	☐ Change	☐ Addition		
NAME	DRAGMAN, ROY		12 NAME	DRAGMAN,	ROY					
STREET ADDRESS	5909 SW 21 ST		13 STREET ADDRESS	6151 MIRA	MAR PARKW	AY, S	UITE	122.		
CITY-ST-ZIP	WEST HOLLYWOOD FL 33023		14 CITY-ST-ZIP	MIRAMAR,	FL, 3	3023				
TITLE	D	☐ DELETE	21 TITLE	D .	•		Change	☐ Addition		
NAME	DRAGMAN, ROY	•	22 NAME	DRAGMAN,	ROY					
STREET ADDRESS	5909 SW 21 ST		2.3 STREET ADDRESS		MAR PARKW	AY. S	UITE	122		
CITY-ST-ZIP	WEST HOLLYWOOD FL 33023		2. 4 CITY-ST-ZIP		FL,3		<u> </u>			
TITLE		☐ DELETE	3.1 TITLE		,		Change	☐ Addition		
NAME			3.2 NAME							
STREET ADDRESS			3 3 STREET ADDRESS							
CITY-ST-ZIP			3.4. CITY-ST-ZIP							
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition		
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS				:			
CITY-ST-ZIP			4.4 CITY-ST-ZIP							
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition		
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY-ST-ZIP							
TITLE	•	☐ DELETE	6.1 TITLE				Change	☐ Addition		
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP .			6.4 CITY-ST-ZIP	<u> </u>		•	,			

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 the particular properties of the corporation o Block 12 or Block 13 if changed, o

SIGNATURE: