**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9800000532

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2. Principal Place of Business				26				Į	59-348860	9 H	Not Applicable	•
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional	٦.
22	-		27	<u>-</u>					5. Certificate of Status Desired	Fee	Required	-J`
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ļ	9. Name	and Address of Cu	rent Kegister	eo Agent		81	Name		19. Italia alia Addiesa di Italia			_
RAIN	GH, RON E	1				82	_					-
		BOULEVARD					Street /	Addres	s (P.O. Box Number is Not Acceptable)	)		1
SUITE 300												٦
	DLEBURG F	L 32068				84			<u> </u>	[0x] 7	n Code	$\dashv$
						City	FL 85 Zip Code				- 1	
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	to the provis	ions of Sections 607.	0502 and 607.	.1508, Florida Statu	es. the	above		corpor	ation submits this statement for the purp	pase of changing	its registered	┨
	to the provis	ions of Sections 607. ent, or both, in the St	0502 and 607- ate of Florida ligations of, Se	.1508, Florida Statu Such change was a ection 607.0505, Fk	es, the uthorizate Sta	above ed by atutes		corpora oration	ation submits this statement for the purp a board of directors. I hereby accept the	pose of changing e appointment as	its registered registered	
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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 princial report is true and accurate and that my signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation of the receiver of 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.

**FILED** 

May 01, 1999 8:00 am Secretary of State 05-01-1999 90098 024 \*\*\*150.00