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

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90001 042 ***158.75

DOCUMENT #	P9800000733
4 Corporation Name	. 00000000

WIN WIN FINANCIAL SERVICES, INC.

Principal	Place	οf	Business

3076 OLD STILL LANE

Mailing Address

3076 OLD STILL LANE



WESTON FL 33331-3029		WESTON FL 33331-3029		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
					01/05/1998			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		-	Applied For
21 9000	SHERIDAN ST.	26 9000 SHERIC	DAN _	1.	65-0796230			Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	•		5. Certificate of Status Desired			Additional Required
22 # 11	9	27 # 119						
City & State	· • • • • • • • • • • • • • • • • • • •	City & State			6. Election Campaign Financing		•	May Be
23 /500	GROKE TINES, IN	28 FEMBROKE	JINES	<u>/~~,</u>	Trust Fund Contribution			d to Fees
Zip	Country	Zip	Country	n	8. This corporation owes the curre	ent year Inta	angible ∐Yes	ĭ¥No
24 <i>330</i>		1-0 -0 -0 -0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	30 <i>4.5</i>	<i>]</i> +	Personal Property Tax. 10. Name and Address of New R	enistered A		
	9./Name and Address of Current	Registered Agent	81	Name	10. Marile and Address of New A			
ST .	AUBYN HANSON, ERROL CONRO)A						
	OLD STILL LANE	·•	82	Street Addr	ress (P.O. Box Number is Not Accepta	ible)		
	TON FL 33331-3029		83					
*****	71014 1 2 00001 0025		00	_				
			84	City		FL	85 Zi	p Code
	to the provisions of Sections 607.0502				the state this statement for the		changing	ite registered
SIGNATURE	Signature, typed or printed name of registered agent			signature require	ADDITIONS/CHANGES TO OF	OATE	D DIBEC	TOPS IN 12
12.	OFFICERS AND	DELETE	13.	<u> </u>	ADDITIONS/CHANGES TO OF	ICERS AN	Chang	
TITLE	D OT AUDVALUANCON EDDOL C		1.2 NAME				— - ч	_
NAME	ST. AUBYN HANSON, ERROL C	IUNNUT	1	*****************				
STREET ADDRESS	3076 OLD STILL LANE		1.3 STREET /					
CITY-ST-ZIP	WESTON FL 33331-3029	☐ DELETE	2.1 TITLE	-219			[] Chang	e
TITLE	D THE TABLE THE HANGON MADEENIA	-	2.2 NAME	1			<u> </u>	
NAME	ELIZABETH HANSON, MARLENI 3076 OLD STILL LANE	=	2.3 STREET	ADDRESS				
STREET ADDRESS	WESTON FL 33331-3029		2.4 CITY-ST					
CITY-ST-ZIP	WESTON FE 33331-3029	☐ DELETE	3.1 TITLE	-21			Chang	e Addition
TITLE	}	<u> </u>	3.2 NAME		-			
NAME STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP	Ì		3.4. CITY-ST					
TITLE		☐ DELETE	4.1 TITLE				Chang	e Addition
NAME			4, 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	ZIP			·	
TITLE		☐ DELETE	5.1 TITLE				Chang	e 🗌 Addition
NAME			5.2 NAME					
STREET ADORESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST	-Z!P				
TITLE		☐ DELETE	6.1 TITLE				☐ Chang	e Addition
NAME			6.2 NAME					
STREET ADDRESS	:		6.3 STREET	ADDRESS				
CITY OF TIP	}		6.4 CITY-ST	- ZIP				

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.

438-

CR2E034 (11/98)