

09071999-90002-038-\$550.00-\$550.00

INL NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
 CORPORATION
 ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000002019 ✓
 Incorporation Name

22 HARBOUR, INC.

FILED
 Sep 07, 1999 8:00 am
 Secretary of State

09-07-1999 90002 038 ***550.00

618355 - 90002 - 49



Principal Place of Business Mailing Address
 N FEDERAL HWY 2424 N FEDERAL HWY
 STE 405
 BOCA RATON FL 33431 BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
N FEDERAL HWY		2424 N FEDERAL HWY		01/07/1998	
STE 405		STE 405		4. FEI Number	
BOCA RATON FL 33431		BOCA RATON FL 33431		65-0826912	
Principal Place of Business		2a. Mailing Address		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Not Applicable	
City & State		City & State		5. Certificate of Status Desired	
Country		Country		\$8.75 Additional Fee Required	
25		29		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
COOK, JAMES R		81 Name			
2424 N FEDERAL HWY		82 Street Address (P.O. Box Number is Not Acceptable)			
STE 405		83			
BOCA RATON FL 33431		84 City			
		FL 85 Zip Code			

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
D		1.1 TITLE			
COOK, JAMES R		1.2 NAME			
2424 N FEDERAL HWY, STE 405		1.3 STREET ADDRESS			
BOCA RATON FL 33431		1.4 CITY-ST-ZIP			
ADDRESS		2.1 TITLE			
ZIP		2.2 NAME			
		2.3 STREET ADDRESS			
		2.4 CITY-ST-ZIP			
ADDRESS		3.1 TITLE			
ZIP		3.2 NAME			
		3.3 STREET ADDRESS			
		3.4 CITY-ST-ZIP			
ADDRESS		4.1 TITLE			
ZIP		4.2 NAME			
		4.3 STREET ADDRESS			
		4.4 CITY-ST-ZIP			
ADDRESS		5.1 TITLE			
ZIP		5.2 NAME			
		5.3 STREET ADDRESS			
		5.4 CITY-ST-ZIP			
ADDRESS		6.1 TITLE			
ZIP		6.2 NAME			
		6.3 STREET ADDRESS			
		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.

NATURE:

James R Cook REQUIRED FOR. COOK

8/20/99

295-5402

CR2E034 (5/99)