FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P9800000321	5
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1. Corporatio	n Name	1002 IO			
	VORKS OF SOUTH FLORIDA	, INC.		SEA.	. ∍įjų̃Ęį
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Principal Plac	e of Business	Mailing Address		4 600 1000 1 110 19191 19161 98111 88111 88	
1212 NE 8 STA					
POMPANO BEACH FL 33060 POMPANO BEACH FL 33060		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed	IIS SPACE
				01/12/1998	İ
2. Principal P	lace of Business	2a. Mailing Address		4. Ed I Number	Applied For
21		26		4. HI Number 65 - 0802786	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		S. Getavita et contro pesa eg. 11	Fee Required
City & Stat	le	City & State		6. Etection Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trast Fund Contribution	Added to Fees
Zip 24	Country [25]	Zip	Country 30	8. This corporation owes the current year Personal Property Tax	Intangible LilYes Y INo
	9. Name and Address of Current	L	ον 	10. Name and Address of New Register	Λ
		.,¥⊒aqan u ∀ nu.	81 Name		9
	RILAWYER		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
- :-	ALMERIA AVENUE		5) Siree; Addi	ess (r.o. box number is not voceptable)	
COR	AL GABLES FL 33134		83		1
			84 City		85 Zip Code
				F	L '
office or tagent. La SGNATURE	agistered agent, or both, in the State or in familiar with, and accept the obligation state of the properties of agents. Signature, typed or printed name of registered agents.	ons of, Section 607.0505, Flori	thorized by the Corporational Statutes	oration submits this statement for the purpose on's bound of directors. There by accept the applications of the community of the purpose of the purpose of the community of the	no ultrient as régistered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PSD	E) DELETE	1.1 Dit(#		[Change
NAME	Lioi, Rudolph		12 NAME	80000284	23033L
STREET ADDRESS	1212 NE 8 STREET		13 STREET ADDRESS	-04/16/99-	01078008
CITY-ST-ZIP	POMPANO BEACH FL 33060		1.4 C(TY+\$1-2#*	****150.0	30 ****150 .0 0
TITLE	VD	Elbecete	2 1 TITLE		[Change [Addition [
NAME	LIOI, JERILYNN A		2.2 NAME		
STREET ADDRESS			20 STREET ADDRESS)
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TITLE		L.) DELETE	3 1 UFLF 3 2 NAME		[]Change []Addition [
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CITY-ST-ZIP			33 STREE! ADDRESS		
TITLE		[DELETE	41 Talus		[Change
NAME			4.2 NAME		
STREET ADDRESS			43 STREET ADORESS		
CITY-ST-ZIP			4.4 Offy -\$1-20:		Ì
TITLE		(DELETE	511016		[Change
NAME			5.2 NAME		İ
STREET ADDRESS			53 STREET ASSORESS		1
CITY-\$1-ZIP			5.4 C/TY+ST+Z//*		
TITLE		[] DELETE	61717LE	$A = \epsilon$	[] Change
NAME			6.2 NAME	2 Illialac a	0.00
CYNCET ADDOCSO			■ EXCIDENTATE DE SON I 1		71 ()/ /

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(5)(i). Handle Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early, 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. Florido 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.

SIGNATURE:

GOFFICEROR LEGIO Atty in Pact 4/6/99 561-995-0064

Special Power of Attorney

1. RVDOLPH L101 , President of Stoneworks of South Florida, Inc., hereby grant to my Agent, Victor Lerro of Victor Lerro & Company PA the right to prepare and sign in Block 14 of the signature area the Florida Department of State Profit Corporation Annual Report on behalf of Stoneworks of South Florida, Inc... This Power of Attorney shall become effective immediately, and shall continue until revoked by me in writing.