PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90215 029 ***150.00

DOCUMENT # P9800009071 1. Corporation Name P & P CONSULTANTS, INC.						(1 27 11 2 1 9 111 29 111 1	141 1
Principal Place	e of Business	Mailing Address		<u> </u>	1 1501/001 ton 15101 101(1 40115 EDIS) 00111 441	** ****** ****** ******	
7660 NW 61ST AVENUE 7660 NW 61ST AVENUE PARKLAND FL 33067 PARKLAND FL 33067							
					DO NOT WRITE IN TH	IS SPACE	
,					3. Date Incorporated or Qualifed		
					01/29/1998		
Principal Place of Business 2a. Mailing Address				4.40	4. FEI Number	App	olied For
21 3/70 N Fed Hay 26 7660 NG			261.	AVE	05-08/A3/3/		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A Fee Re	
22 / 00 27							
City & State City & State City & State PARKLAND, FL					Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	•
Zip O-	Country	Žip a a v a	Country	.c A	8. This corporation owes the current year	ntangible	J
24 33	064 [25] USA	29 3306/	0 4	JSA-	Personal Property Tax.		No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registere	d Agent	
00	I MAN DODEDT		81	Name			-
PERLMAN, ROBERT 7660 NW 61ST AVENUE				Street Add	ress (P.O. Box Number is Not Acceptable)		
PARKLAND FL 33067			83		<u> </u>		
,,,,,							
			84	City	F	L 85 - Zip C	Code:
l office or t	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Florid	nonzed by la Statutes	tne corporati i.	poration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate the purpose of when reinstating) DATE	or changing its cointment as rec	registered gistered
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	D	DELETE	1.1 TITLE			Change	Addition
NAME	PERLMAN, ROBERT		1,2 NAME				
STREET ADDRESS			1.3 STREE	TADORESS			ļ
CITY-ST-ZIP	PARKLAND FL 33067		1.4 CITY-8	T-ZIP		. Change	Addition
TITLE	D DCD: 1444 OLAUDIA	☐ DELETE	2.1 TITLE			☐ Change	
NAME	PERLMAN, CLAUDIA		2.2 NAME	T +D0D500			
STREET ADDRESS	7660 NW 61ST AVENUE			T ADDRESS	· .		
CITY-ST-ZIP	PARKLAND FL 33067	DELETE	2. 4 CITY-5	51-ZIP	<u>-</u>	☐ Change	☐ Addition .
TITLE			3.2 NAME				
NAME STREET ADDRESS				TADDRESS			İ
CITY-ST-ZIP			3.4. CITY-5		•		
TITLE		DELETE	4.1 TITLE	J. L.		Change	☐ Addition
NAME		a t	4.2 NAME	-\-	and the second s		{
STREET ADDRESS		; ,	4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP		<u> </u>	
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			4	TADDRESS			
CITY-ST-ZIP			5.4 CITY-5	T-ZIP			C7 4 1 100
TITLE		☐ DELETE	·6.1 TITLE			☐ Change	Addition
NAME	İ		6.2 NAME	T ADDRESS			
!							

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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ole. NAME OF SIGNING OFFICER OR DIRECTOR