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## **PROFIT** CORPORATION ANNUAL REPORT



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Apr 28, 1999 8:00 am Secretary of State 04-28-1999 90029 014 \*\*\*150.00

	1999	Contract of the second	DIVISION OF	CORPORATIONS				
a. Corporation	MENT # P		010277	•				
Principal Place	e of Business		Mailing Address		1 (1911) 112 1213 1211 02111 02111 02111	1141 11611 6611 6 11611	• • • • • • • • • • • • • • • • • • • •	
			4885 N.W. 6TH COURT					
PLANTATION FI	L 33317		PLANTATION FL 33317		DO NOT WRITE IN T	H S SPACE		
					3. Date Incorporated or Qualifed 01/30/1998			
2. Principal P	lace of Business		2a. Mailing Address		4. FEI Number	Api	pied For	
21			26		N.A./CORPORATION	DLE No	t Applicable	]
Suite, Apt.	#, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Re	guired	
City & State	e		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 to Added to		
Zip	Cou	n ry	Zip	Country	8. This corporation owes the current year		<b></b>	
24	25		29	_ [30]	Personal Property Tax.		[]No	ł
	9. Name and Add	diess of Current	Registered Agent	81 Name	10. Name and Address of New Register	e 1 Agent		1
KRET	TSEDEMAS, ALEX							{
4835 N.W. 6TH COURT				82 Street Add	fress (P.O. Box Number is Not Acceptable)			
	NTATION FL 33317			83				1
				84 City		85 Zip C	cycle	
						<sup>=</sup> L		
11. Pursuant	to the provisions of S	ections 607.0502	and 607.1508, Florida State	iles, the above-named con	poration submit; this statement for the purposion's board of directors. I hereby accept the ap	out changing its position of the control of the con	nigistered	
office or r	egistered agent, or bo m familiar with, and a	oin, in the State o iccept the obligati	we of Section 607 0505 Fl	rida Statutos	total de	•	´	
i			1115 OI, OBOILOIT OUT .0500, 1	K nua Sialutes.				
SIGNATURE								
	Signature, typed or printed n	ne of regulared egent	and late if applicable (NOT	(I : Registered Agent signature required 13.	ed when reinstating) DATE			(86)
12.			and late if applicable (NOT	: Registered Agent signature requir				(11/98)
	D	or se of registered agent OFFICERS AND	ind little if applicable (NOT	13.	ed when reinstating) DATE	IND DIRECTO	RS IN 12	34 (11/98)
12.	D KRETSEDEMAS,	OFFICERS AND	ind little if applicable (NOT	13. 1.1 TYTLE	ed when reinstating) DATE	IND DIRECTO	RS IN 12	E034 (11/98)
12. TITLE	D KRETSEDEMAS,	ar is of regulared agent OFFICERS AND ALEX COURT	ind little if applicable (NOT	13. 1.1 TITLE 1.2 NAME	ed when reinstating) DATE	/ ND DIRECTO	RS IN 12	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS	D KRETSEDEMAS, 4885 N.W. 6TH (	ar is of regulared agent OFFICERS AND ALEX COURT	ind little if applicable (NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ed when reinstating) DATE	IND DIRECTO	RS IN 12	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRETSEDEMAS, 4885 N.W. 6TH (	ar is of regulared agent OFFICERS AND ALEX COURT	ind late if applicable (NOT DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CTY-ST-ZIP 2.1 TITLE 2.2 NAME	ed when reinstating) DATE	/ ND DIRECTO	RS IN 12	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE	D KRETSEDEMAS, 4885 N.W. 6TH (	ar is of regulared agent OFFICERS AND ALEX COURT	ind late if applicable (NOT DIRECTORS DELETE	13. 1.1 TILE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TILE 22 NAME 2.3 STREET ADDRESS	ed when reinstating) DATE	/ ND DIRECTO	RS IN 12	CR2E034 (11/98)
12. TITLE NAME STREET ADDRE'S CITY-ST-ZIP TITLE NAME STREET ADDRE'S CITY-ST-ZIP	D KRETSEDEMAS, 4885 N.W. 6TH (	ar is of regulared agent OFFICERS AND ALEX COURT	DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ed when reinstating) DATE	/ ND DIRECTO	RS IN 12 Addition	CR2E034 (11/98)
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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(ii). Florida Statutes. I further cartify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have this same legal effect as if made under eath; that I am an officer or director of the corporation or the receivar or trustee empowered to execute this report as required by Chaptar 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.

SIGNATURE

04/23/99

954-791-1217