## **PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000012711

HEAT STORE, INC.

Principal Place of Business

SUNTRUST INTERNATIONAL CENTER

Mailing Address

SUNTRUST INTERNATIONAL CENTER

**FILED** May 06, 1999 8:00 am Secretary of State 05-06-1999 90189 034 \*\*\*150.00



	AST THIRD AVENUE. SUITE 2300	ONE SOUTHEAST THIRD AVENUE. SUITE 2300 MIAMI FL 33131			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 02/09/1998			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	· ——	oplied For	1	
21		26		65-0827900		lot Applicable	.]	
Suite, Apt. #, etc.		Sulte, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required				
City & Stat	0	City & State			6. Election Campaign Financing	-\$5.0	) May Be	
23		28		Trust Fund Contribution Added to Fees				
Zip	Country Zip		Country		8. This corporation owes the current year I			}
24	25 29 30			Personal Property Tax. ☐ Yes ☐ No				
	9. Name and Address of Current	Registered Agent	<u> </u>		10. Name and Address of New Registere	Agent	<del> </del>	4
	projectoro 1051/7 0/	\nn\n_+=\n	81	Name				1
Intrastate registered agent corporation 701 Brickell avenue			82	Street Add	ress (P.O. Box Number is Not Acceptable)			
SUITE 300			83					
MIAMI FL 33131			84	City	F	85 ZIp	Code	1
office or r	registered agent, or both, in the State or im familiar with, and accept the obligati	f Florida, Such change was aut ons of, Section 607.0505, Florid	nonzeo by la Statutes	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as I	egistered	
	Signature, typed or printed name of registered agent OFFICERS AND			K adustrus ladnik	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	OPS IN 12	18
12.		DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	Change		13
TITLE	D D	_ bete,e	1.2 NAME				_	1
NAME	ARISON, MICKY	- 0000	1.3 STREET	ADDRESS				8
STREET ADDRESS	ONE S.E. THIRD AVENUE SUTT	2300						5
CITY-ST-ZIP	110 411 12 14 14 14 14 14 14 14 14 14 14 14 14 14		1.4 CTY-ST 2.1 TITLE	-48		Change	Addition	8
TITLE	D .			]				
NAME	TOUR, HOWARD O		2.2 NAME					١
STREET ADDRESS	ONE S.E. THIRD AVENUE SUIT	: 2300	2.3 STREET					1
CITY-ST-ZIP	MIAMI FL 33131	☐ DELETE	2.4 CITY-S 3.1 TITLE	1-44		Change	☐ Addition	1
TITLE	D	_ bere-te	3.2 NAME				_	1
NAME	CROSS, L J	. 0000	3.3 STREET	Annosce	المستحرات سي الم		~	
STREET ADDRESS	ONE S.E. THIRD AVENUE SUITE	: 2300		1	•			1
CITY-S1-ZIP	MIAMI FL 33131	☐ DELETE	3.4. CITY-S 4.1 TITLE	1-28		Change	Addition	1
TITLE-		_ DECE.E	4.2 NAME	1			_	l
NAME								]
STREET ADDRESS			4.3 STREET					1
CTY-ST-ZIP		DELETE	4.4 CITY-ST 5.1 TITLE	1-214		☐ Change	☐ Addition	t
TITLE .			5.1 TITLE 5.2 NAME					
NAME			5.3 STREET	ADDRESS				
STREET ADDRESS		į	5.4 CITY-S1	j				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			Change	Addition	i
TTLE		☐ htrese	6.2 NAME					1

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 true de 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, until all other line provered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS