CORPORATION ANNUAL REPORT 1000

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 1. Corporation Name

FILED Mar 15, 2000 8:00 am Secretary of State 03-15-2000 90120 018 \*\*\*150.00

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ncipal Place of Business	Mailing /	Address			1		00000	
1310 SW 25TH PLA	c <del>s</del>	۱ -	AME					
210 32 20 14	_			DO NOT WRITE IN THIS SPACE				
BOYNTON BEACH, FO	3342	<u>ا</u>			3. Date Incorporated or		10 01 702	
,		 I			2/10/9	8		
Principal Place of Business	2a. Mailí	ing Address			4. FEI Number			pplied For
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Suite, Apt. #, etc.		Apt. #, etc.						Additional
	<u> </u>	27			5. Certifcate of Status I	Desired 📙	•	Required
City & State		& State		~	-6. Election Campaign F	Financing =	- \$5.00	May Be
·	28	† '			Trust Fund Contribut	- 11	•	to Fees
Zip Country	Zip	1	Country	,	8. This corporation owe	es the current year	Intangible	
25	29	3	10		Personal Property Ta	-	Yes	□No
9. Name and Address of Cur		'Agent			10. Name and Address	of New Register	ed Agent	
		; •	81	Name				
DAVE G. MAYER		1	82	Ctroot Add	ross (D.O. Pay Number is N	at Accentable)		<del></del>
1310 SW 25T	H PLACE	<u> </u> 	02	Street Add	ress (P.O. Box Number is N	of Acceptable)		
,5,0 3 20 0.00			83					
BOYNTON BEACH	.FL	B3426						
	, –	1	84	City		F	L 85 Zip	Code
Pursuant to the provisions of Sections 607.0	0502 and 607 150	18 Elorida Statutos	the above	a-named com	poration submits this stateme	-	_ , ,	s registered
office or registered agent, or both, in the Sta	te of Florida. Su	ch change was aut	horized by	the corporation	on's board of directors. I her	reby accept the ap	pointment as r	egistered
agent, I am familiar with, and accept the obl	idetions of, Section	on 607.0505, Florid	ia Statutes.	. ~	,			
NATURE V	un-	i	ia Statutes.		,			
NATURE Signature, typed or printed name of registered	agent and title if applica	l (NOTE: R	legistered Agent	1/4	245. ed wheri reinstating)	3 - 7 DATE	00_	
NATURE Signature, typed or printed name of registered OFFICERS,	agent and title if applica	able. (NOTE: R	egistered Agent	1/4	245.	3 - 7 DATE	AND DIRECT	ORS IN 12
NATURE Signature, typed or printed name of registered.  OFFICERS,  DIRECTOR, PRE	agent and title if applica AND DIRECTOR	l (NOTE: R	legistered Agent	1/4	245. ed wheri reinstating)	3 - 7 DATE	00_	ORS IN 12
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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.

IGNATURE AND TYPED OR BUSINED NAME OF SIGNING OFFICER OR DIRECTOR

PRISIONET