PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P98000016064	1
1. Compression Name	Lagonnon Long.	1

FILED Apr 01, 1999 8:00 am Secretary of State 04-01-1999 90109 018 ***150.00

Principal Place of Business Mail	ing Address			I the time to be seen as we are a seen as a se		
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#205		DO NOT WRITE IN THIS SPACE				
HALLANDALE FL 33009 HALL	andale fl 33009			3. Date Incorporated or Qualified		
				02/18/1998		į.
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	Mailing Address 1923 らいご	and a	errace	65-0814684		Applicable
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-,	ouite, Apr. 14, 610.			5. Certificate of Status Desired	Fee Re	
27	City & State			8 Election Campaign Financing	\$5.00	May Be
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Zip Country 4 23331	33312		ŹЯ	Personal Property Tax.	☐ Yes	ØNo .
25 USA 29 29 9. Name and Address of Current Registe		<u> </u>	<u></u>	10. Name and Address of New Registered	Agent	
3. HE IN BIID MEDICE OF CONTOUR PROSPER	<u> </u>		Name			Į
SMITH, MARK		<u> </u>		ress (P.O. Box Number Is Not Acceptable)		
212 THREE ISLANDS BLVD		ľ	32 Street Addr	ress (P.O. Box Number is net Acceptable)		
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HALLANDALE FL 33009		L			les 75-6	
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11. Pursuant to the provisions of Sections 607,0502 and 607	7 1509 Florida Stabile		ve-named com	in the state state that the purpose of	changing its	registered
 Pursuant to the provisions of Sections 607.0502 and 607 office or registered agent, or both, in the State of Florida agent. I am familiar with, and accept the obligations of, \$. Such change was a	uthorized I	by the corporate	on's board of directors. I hereby accept the appo	intment as reç	gistered
agent. I am familiar with, and accept the obligations of, S	Section 607.0505, Flo	rida Statut	es .			1
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use and that my signature shall have the same legal effect as it made throst dath; that I am at ecute this report as required by Chapter 607, Florida Statutes; and that my name appears in other like empowered. officer or director of the corporation or the re Block 12 or Block 13 if changed, or on an at

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