Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90044 037 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000016203

1. Corporation Name

SUPER SKATES VI, INC.

										
Principal Place of Business Mailing Address						1 (00)(00)	ELO TOTOL LOCAL DOLLI	OBIN DON'S BOIDS	TOTAL BUILD STREET	TRIBE (III INCI
1378 SOUTHWEST 160 AVENUE 1378 SOUTHWEST 160 AVENU			NUE		1					
BAY E-5 BAY E-5										
WESTON FL 33326 WESTON FL 33326					<u> </u>	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						02/19/199				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number				plied For
21		26			\longrightarrow	65-0	816939	<u> </u>		t Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.				5. Certifcate of	Status Desired		\$8.75 A Fee Re	
City & State)	City & State	City & State			6. Election Can	npaign Financin	 g _	\$5.00	May Be
23		28				Trust Fund C		⁹ П	Added to	o Fees
Zip	Country	Zip	Country	,		8. This corpora	tion owes the c	urrent year Int	angible	
24	25	29	30			Personal Pro	perty Tax.		Yes	□No
	9. Name and Address of Curre	nt Registered Agent			1	0. Name and	ddress of Nev	v Registered	Agent	
			81	Name						
GOLDBERG, MARK H			00	Chun at	A	(P.O. Box Num	har is Not Assa	ntable)		
1000	0 STIRLING ROAD		82	Street	Address	(P.O. Box Num	Der is Not Acce	раона)		
SUIT	E 1		83							
C00	PER CITY FL 33024			l						
			84				•	FL	85 Zip C	
office or re agent. I ar	to the provisions of Sections 607.05 agistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was au	ithorized by	the corpo	oration's	board of directo	rs. I hereby acc	cept the appoi	ntment as rec	gistered
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE:	Registered Age	nt signature i	required who	en reinstating)		DATE		
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/0	CHANGES TO	OFFICERS AN		
TITLE		☐ DELETE	1.1 TITLE		PD		•		☐ Change	X Addition
NAME			1.2 NAME		PETE	R RETSFELD	Λ			
STREET ADDRESS			1,3 STREET ADDRESS		820	ובו שנו נ	MIENIE			
CITY-ST-ZIP		1 4 CITY-ST-ZIP		PLA	ANTATEM	J FC 33.	325			
TITLE		☐ DELETE	2.1 TITLE		VO				☐ Change	Addition
		_	2.2 NAME		Agri	HUR STLBE	-Roman			
NAME STREET ADDRESS			2.3 STREET ADDRESS 6		609	VERONA	PLACE			
			2.4 GITY-5			STON FL 3				
CITY-ST-ZIP		□ DELETE	3.1 TITLE	51- <u>21</u> F	WE.	310N FC 3	77-10		☐ Change	Addition
TITLE		_ occe.e	3.2 NAME							_
NAME										
STREET ADDRESS			1	T ADDRESS	'					
CITY-ST-ZIP			3 4. CITY-1	ST-ZIP					Change	Addition
TITLE		□ DELETE	4.1 TITLE						□ oriange	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	T ADDRESS	j					!
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	₩					
TITLE		☐ DELETE	5.1 TITLE						☐ Change	☐ Addition
NAME			5.2 NAME						•	
STREET ADDRESS			53 STREE	T ADDRESS	;					i
CITY-ST-ZIP			5.4 CITY- S	T-ZIP	<u> </u>					
TITLE		☐ DELETE	6.1 TITLE						Change	☐ Addition

CITY-ST-ZIP 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.

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS