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 # P98000016287

1. Corporation Name

CORAL HOLDING ENTERPRISES, INC.

Principal	Place	of	Business

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90065 031 ***150.00



Principal Place of Business		Mailing Address	Mailing Address				
2400 E. LAS OLAS BLVD STE. 104 FT. LAUDERDALE FL 33301			2400 E. LAS OLAS BLVD., STE. 104 FT. LAUDERDALE FL 33301				
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	
						02/18/1998	
2. Principal P	lace of Business	2a. Mailing Address					oplied For
21		26				65 081 N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22	.,	27				5. Certifcate of Status Desired Fee R	equired
City & State		City & State				6. Election Campaign Financing S5.00	May Be
23		28					to Fees
Zip	Country	Zip	Cou	ntrv		8. This corporation owes the current year Intangible	
— ·	25	29	30	,		Personal Property Tax.	□No
24	9. Name and Address of Curre		301	Γ		10. Name and Address of New Registered Agent	
	9. Name and Address of Curre	in negratered Agent		81	Name	10. 11.	
STR	AKER, SUSAN						
	E. LAS OLAS BLVD., STE. 104	1		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33301							
FI. L	AUDERDALE PL 33301			83			
				84	City	85 Zip	Code
				-	Oity	FL °° ² °	i
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the obligi	e of Florida. Such change was	authorized	i by i	tne corporation	oration submits this statement for the purpose of changing its on's board of directors. I hereby accept the appointment as re-	s registered egistered
SIGNATURE							
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NC	TE: Registered	Agen	t signature require	d when reinstating) DATE	
12.	OFFICERS AI	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITLE	Р	☐ DELETE	1.1 TI	TLE		☐ Change	Addition
NAME	STRAKER, SUSAN		1.2 N	ME		•	
STREET ADDRESS	ALOO E LAO OLAO BLUD. OTE ANA		1,3 ST	REET	ADDRESS		
	FT. LAUDERDALE FL 33301	-	14.0	TY-SI	7. 7IP		
CITY-ST-ZIP TITLE			2.1 TI			☐ Change	Addition
		_ 322212	2.2 N				_
NAME					ADDDECC		i
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP		[] p.e. eve	2.4 C		T-ZIP	Change	Addition
TITLE		☐ DELETE	3.1 TI			☐ Change	
NAME			32 N	ME			
STREET ADDRESS			3.3 ST	REET	ADDRESS		
GTY-ST-ZIP			3.4. C	ITY-S	T- ZIP		
TITLE		☐ DELETE	4.1 TI	TLE		☐ Change	Addition
NAME		·	4.2 N	AME			
STREET ADDRESS			4.3 ST	REET	ADDRESS		

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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Make !! SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change ☐ Addition

Change

Addition