PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 01, 1999 8:00 am Secretary of State

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DOCUMENT # POROO

	N ADVISORS, INC.		San	a said the said			
Principal Place of Business Mailing Address					i indilant iin iaret intit natit antit gatit anti	, 11881 1818) 18111 BJ	ELDI (#91
8065 S.E. DOUBLETREE DRIVE HOBE SOUND FL 33455 HOBE SOUND FL 33455							
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	3 31 700	
					02/25/1998		ļ
2 Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21	Naco St. Babilitate	26			65-0815932	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 A	dditional
22		27			5. Certificate of Status Desired	Fee Req	quired
City & State	e	City & State			6. Election Campaign Financing	\$5:00 N	Vlay Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Cour	itry	8. This corporation owes the current year Ir	ntangible ,	. I
24	25	29	30		Personal Property Tax.		No
	9. Name and Address of Curren	t Registered Agent		Od Name	10. Name and Address of New Registered	I Agent	
MCC	ADTUV TEDENICE D			81 Name			
MCCARTHY, TERENCE P				82 Street Add	ress (P.O. Box Number is Not Acceptable)		
2081 EAST OCEAN BOULEVARD STUART FL 34996			-	83	·		
310/	ANI FL 34990			83		•	}
			Ī	84 City	F	85 Zip C	ode
							rogistored
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	s authorized	by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appear	ointment as reg	istered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NC	DTE: Registered i	Agent signature require			
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	7/V/T/S/D/C	☐ DELETE	1.1 TIT	LE	·	Change	Addition
							_
NAME	THOMAS L. MO	YER	1.2 NA	ME			
NAME STREET ADDRESS	THOMAS L. MO 8065 S.E. POUBLE	YER TREE DR.		ME REET ADDRESS			
	THOMAS L. MO BOGS S.E. POUBLE HOBE SOUND, F	TREE VR L. 33455	1,3 STI				
STREET ADDRESS	THOMAS L. MO BOGS S, E, POUBLE HOBE SOUND, F	YER ETREE DR. L. 33455 DELETE	1,3 STI	REET ADORESS Y-ST-ZIP		Change	Addition
STREET ADDRESS CITY-ST-ZIP	THOMAS L. MO 8065 S.E. POUBLE HOBE SOUND, F	TREE VR L. 33455	1.3 STI 1.4 CIT	REET ADORESS Y-ST-ZIP		☐ Change	
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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.