

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000019536  
1. Corporation Name

INTELLIHOMES ASSOCIATES INC.

Principal Place of Business

9615 NW 76 STREET  
TAMARAC FL 33321

Mailing Address

9615 NW 76 STREET  
TAMARAC FL 33321

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

RAWDIN, BRUCE  
9615 NW 76 STREET  
TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1998

4. FEI Number

65-0818936

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

500002952765--7

-08/06/99--01061--014

\*\*\*\*150.00

\*\*\*\*150.00

FL

85

Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE 0 ☐ DELETE

NAME RAWDIN, BRUCE  
STREET ADDRESS 9615 NW 76 STREET  
CITY-ST-ZIP TAMARAC FL 33321

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

SIGNATURE: *Bruce Rawdin*

7/6/99

954/220/0205

0009531

CR2E034 (5/99)

TO: DIVISION OF CORPORATIONS  
Annual Reports Filings

7-8-99

DEAR SIR OR MADAM,

I AM THE OWNER OF CHULA INC. AND INTELLIHOMES ASSOCIATES INC. I HAVE ALWAYS PRIDED MYSELF ON FILING MY REQUIRED REPORTS ON TIME.

In April, JUST PRIOR TO HAVING MAJOR SURGERY, I INSTRUCTED MY ASSISTANT TO MAIL IN MY 1999 ANNUAL REPORTS AND, UNTIL I RECEIVED A RECENT NOTICE BELIEVED THEY HAD BEEN MAILED. I HAVE BEEN SUFFERING FROM MEDICAL COMPLICATIONS AND MY PREGNANT WIFE ALSO HAS HAD MEDICAL CHALLENGES. I ASK THAT YOU PLEASE WAIVE THE LATE FEES IN THIS CASE AS I HAD BELIEVED THE REPORTS HAD BEEN FILED IN A TIMELY MANNER. MY ASSISTANT, WHO DUT IN APRIL NEVER TOLD ME SHE NEVER MAILED IN THE REPORTS, AND DUE TO OUR MEDICAL CHALLENGES, I DID NOT "CATCH" THIS ERROR. ENCLOSED PLEASE FIND THE ~~normal~~ \$150<sup>00</sup> FILING FEE FOR EACH CORPORATION. I HOPE YOU'LL FORGIVE ~~my~~ <sup>the</sup> MISTAKE AND WAIVE THE LATE FEE. THAT MONEY WOULD BE ESPECIALLY USEFUL FOR OUR NEW BABY BOY, DUE ON SEPT. 10, 1999.

THANK YOU IN ADVANCE FOR YOUR CONSIDERATION.

Sincerely,

Bruce L. Rawlin.

Bruce L. Rawlin.