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

CORPORATION ANNUAL REPORT 1000



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

	1999	Division or ec	JAY OLOVII	Olas	ביי ביי מין מין קק	
DOCUMENT # P98000019685  1. Corporation Name					99 HMR 23 FH 3: 55	
						)
Principal Place	e of Business	Mailing Address			+ 168/168/16/16/16/16/16/16/16/16/16/16/16/16/16/	! !!#!# \$0! 6 0! \$! !0!\$1 6!!! 169
7695 S.W. 104TH STREET STE. 210 7695 S.W. 104TH STREET STE. 210						
MIAMI FL 33156	5	MIAMI FL 33156			DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualifed	]
					03/02/1998	_
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21		Suite Apt #, etc				Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc   Suite   Suite					5. Certificate of Status Desired [ ]	\$8.75 Additional Fee Required
City & State	9	City & State			6. Etection Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zφ	Country	Zιρ	Country		This corporation owes the current year In	tangible
24	25	29 3	<u>o </u>		Personal Property Tax	[]Yes []No
	9. Name and Address of Curre	nt Registered Agent	   B1	Name	10. Name and Address of New Registered	Agent
LITTI	MAN, ERIC P					
	S.W. 104TH STREET STE. 21	0	82	Street Ad	dress (P.O. Box Number is Not Acceptable)	,
MAIM	Al FL 33156		83	1		
			84	6.1.		المارية الممار
			54	City	Fl	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	the abov	e named co	rporation submits this statement for the purpose oution's board of directors. Thereby accept the appo	I changing its registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	la Statutes	ne corpora ·	monts board of orectors. Thereby accept the appo	Intrient as registered
SIGNATURE	<b>*</b>	n de la companya del companya de la companya del companya de la co				
12.	Signature, typed or printed name of registered an	ND DIRECTORS (NOTE RE	egistered Age. <b>13.</b>	J. Signal de Higo	DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DP	[ ] DELFTE	1 LTITLE	1		[]Charge []Addition
NAME	LITTMAN, ERIC P		1.2 NAME	ĺ		ĺ
STREET ADDRESS	7695 S.W. 104TH STREET S	TE. 210	13 STREE	1 ADDRESS		ļ
Cffy-Sf-ZiP	MIAMI FL 33156		14 CITY-S	1-ZIP		
TITLE		[   DELETE	2171111	}		[ Change [ Addition
NAME			2.2 NAME			,
STREET ADDRESS			2.3 STREE 2.4 CHTY-5	T ADDRESS		
CITY-S1-ZIP TITLE	[  DFLETE			,1.21		
NAME			31 TUTLE 32 NAME 33 STREET ADDRESS		600002815	,7968 (
STREET ADDRESS					-03/23/99	
CITY-ST-ZIP			3.4 City-\$1-7i2		***1500.00	****150.00
TITLE		[   DELETE	4 1 TITLE	ĺ		[   Change
NAME			4 2 NAME			
STREET ADDRESS			1	LADORESS		ļ
CITY-ST-ZIP TITLE		É J DELETE	44 CITY - S 51 TITLE	1 - 21-		[   Change
TOLE		L 1 Duite #C	■ 2 1 111LE			Elevande Elevandori

CITY-ST-ZIP 14. Thereby 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 paperties 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 of 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.

61 THLE

6.2 NAME

[ ] DELETE

5.3 STREET ADDRESS

63 STREET ADORESS 6.4 CITY-ST-ZIP

5.4 City-S1-7#

SIGNATURE:

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ERICP. LITTMAN 2/26/99 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFIC