## 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

## FILED Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90020 033 \*\*\*550.00

DOCUMENT #	P980000210	15

RAPUNZEL'S, INC.

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Principal Place	of Business	·	Mailing Ac	dress	-								-	
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City & State	<del>0</del>		City &	State			İ	6. Election (					.00 мау	
23			28		<b>-</b>	_		Trust Fur	nd Contribut	ion		Ac	ided to Fe	es
Zip	L,c	ountry	Zip		<del></del>	intry		8. This corp			ent year r	$\neg$	<b>⊠</b> No	,
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	9. Name and	Address of Current	Registered A	gent		mal at		10. Name ar	nd Address	of New R	egistered	Agent	_	
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		D SUITE 324 ATR	IUM					<u>`</u>						
BOC	CA RATON FL 3	3431				83								
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agent. Fa	Signature, typed or printe  D  RAY, ROBERT	d name of registered agent of OFFICERS AND	and title if applicable	e. (	(NOTE: Registe 13. 1.1 TI	TLE  AME	nature required	d when reinstating)			DATE	ND DIR	ECTORS II	N 12
SIGNATURE .	Signature, typed or printe  D  RAY, ROBERT 7216 SAN SE	d name of registered agent OFFICERS AND BASTIAN DRIVE	and title if applicable	e. (	(NOTE: Registe 13. 1.1 TI	TLE	nature required	d when reinstating)			DATE	ND DIR	ECTORS II	N 12
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 chapted, or on an attachment with an address.

561-218-270