PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000023735

1. Corporation	n Name S FINANCIAL, INC.										
						_				INDE DAL IDE	
Principal Place		Mailing Address									
1401 S. DIXIE HWY POMPANO BEACH FL 33060 POMPANO BEACH FL 33060											
PUMPANU BEA	CH FL 33080	POMPANO DEMON PL 3000	,				DO NOT WE	RITE IN THIS	SPACE		_
						3. Date Inc	corporated or Qualife	4	-		7
						03/12	/1998				_
Principal Place of Business 2a. Mailing Address						4. FEI Nut			App	olled For]
21	26					0823928		Not	Applicable	1	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifca	te of Status Desired		\$8.75 A		
22		27							Fee Re	<u> </u>	┨
City & Stat	8	City & State			6. Etection Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees				1		
23		28					und Contribution) Fees	-{
Zip. 	Country -	Zip		intry_			moration owns the cu	ment year, in		□No	
24	25		30				al Property Tax. and Address of New	Panietorod			┪
	9. Name and Address of Current	Registered Agent		81	Name	10. Name a	and Address of New	Registerati	WARIT		1
SCH	OENHEIT, KIRT			۱۳۱	1101110	VAN VU	RST: HENRY		<u> </u>		1
	S. DIXIE HWY		82	Street Addr	ess (P.O. Box	Number is Not Accep	table)				
			83		1401 5	. DIXIE HWY				1	
FOM	PANO BEACH FL 33060			83		FOLEST	O BEACTI <u>. 184</u>				j
				84	City		O BEACH	FI	85 338	298	1
		1 007 1500 First 1		Щ					- 1 1		4
11. Pursuant office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was at	thorized	d by t	he corporation	on's board of di	irectors. I hereby acc	ept the appo	intment as reg	istered	
agent. I a			ida Stat	ules.			~ /			•	
SIGNATURE	Henry Van Vurst, Di	rector	2	Ann	Dix.	d when reinstating)		17/99 _			ء ا
Signature. typed or printed name of registered agent and title if applicable. (NOTE: Re 12. OFFICERS AND DIRECTORS			13.				NS/CHANGES TO O	FFICERS A	ND DIRECTO	RS IN 12] 8
TITLE	D	X DELETE	1,1 17	TLE	1	٠.,			Change	☐ Addition	CR2E034 (11/98)
NAME			1.2 N	1.2 NAME							8
STREET ADDRESS			1.3 STREET ADDRESS							18	
CITY-ST-ZIP	POMPANO BEACH FL 33060			1.4 CITY-ST-ZIP							₽
TITLE	D			2.1 TITLE					Change	Addition	ᄀᅙ
NAME	VAN VURST, HENRY		2.2 N			•					
STREET ADDRESS				2.3 STREET ADDRESS							
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CITY-ST-ZIP				1TY-\$T							ļ
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CITY-ST-ZIP			5.4 CI	TY-ST-	ZIP			_]
TITLE	·	☐ DELETE	6.1 TT	TLE					Change	Addition	1
NAME			62 N	AME							1
					LODRESS						i .

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Henry Man Vurst

(954)942-7108

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90087 040 ***150.00