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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000025262

1. Corporation Name

LNEED IT NOW, INC.

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90027 016 ***150.00



Principal Place	of Business	Mailing Address	- -				() ## () ## (11616	
633 S. ANDREWS AVE 3RD FLOOR 113 N. FEDERAL HM FT. LAUDERDALE FL 33301 DANIA FL 33004			. HWY.				<u> </u>			
							DO NOT WE	RITE IN THIS	SPACE	
							3. Date Incorporated or Qualife 03/16/1998	d		
2. Principal Pl	ace of Business	2a. Mailing Addr	ress	17-2-4			4. FEI Number 082-681	92	<u>-</u>	plied For t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.				5. Certifcate of Status Desired		\$8.75 . Fee Re	
City & State	<i>: جنتے ہے۔ آب جنتے شہو</i>	City & State					6. Election Campaign Financin	9	\$5:00	May Be
23		28					Trust Fund Contribution	. Н 	Added	o Fees
Zip	Country 25	Zip	36	Countr	у		This corporation owes the cu Personal Property Tax.	irrent year Int	angible XYes	□No
	9. Name and Address of Current			<u> </u>			10. Name and Address of New	/ Registered	Agent	
	v. Human and requires a self-off			81	1 Nan	10				
ADA	MS, GERALD J					-4.4.11	(D.O. Dan No bas is No. 4	atable)	,	
	N. FEDERAL HWY.			82	2 Stre	et Addre	ess (P.O. Box Number is Not Accep	otable)		
DAN	IA FL 33004			83	3					
				84	4 City			FL	85 Zip	Code
11, Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	if Florida. Such char	nge was autr	, the above	ve-nam	ed corpo	oration submits this statement for the	e purpose of	changing its	registered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.	.0505, Florid	la Statute	es.	porulioi	To bear of an odd on the object			
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.	.0505, Flond	ia Statute	es. 		when reinstating)	DATE		
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agent. I a	m familiar with, and accept the obligation of registered agent OFFICERS AND PVTS	and title if applicable. D DIRECTORS	.0505, Flond	egistered Age	ent signatu		when reinstating)	DATE		
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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 organ attachment with an address, with all other like empowered.