

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 # P98000027499

1. Corporation Name

RELATED PARTNERS, INC.

Principal Place of Business

3701 SOUTH ORANGE CONGRESS AVENUE
LAKE WORTH FL 33461

Mailing Address

3701 SOUTH ORANGE CONGRESS AVENUE
LAKE WORTH FL 33461

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

Zip

29

Country

30

9. Name and Address of Current Registered Agent

MUSA, MARCO
3701 SOUTH ORANGE CONGRESS AVENUE
LAKE WORTH FL 33461

81 Name JON JASIEL

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

83

84 City 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

JON JASIEL

JON JASIEL

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME MUSA, MARC ANDREA
STREET ADDRESS 3170 SOUTH ORANGE CONGRESS AVENUE
CITY-ST-ZIP LAKE WORTH FL 33461

DELETE

1.1 TITLE D P
1.2 NAME MASSIMO MUSA
1.3 STREET ADDRESS 3701 SOUTH CONGRESS AVENUE
1.4 CITY-ST-ZIP LAKE WORTH, FL 33461

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

2.1 TITLE T.O.V
2.2 NAME JON JASIEL
2.3 STREET ADDRESS 3701 SOUTH CONGRESS AVENUE
2.4 CITY-ST-ZIP LAKE WORTH, FL 33461

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change

Addition

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.

SIGNATURE: *Jon JASIEL* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

561-965-2445

Daytime Phone #

0577313

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90273 039 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1998

4. FEI Number

65-0830873

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. Yes No

CR2E034 (11/98)