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

PROFIT CORPORATION ANNUAL REPORT

1999



DIVISION OF CORPORATIONS

FILED May 01, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State 05-01-1999 90020 028 ***150.00

DOCUMENT # P9800030182 CORNER ROSEMARY AND BANYAN, INC.						
Principal Place	of Rusiness	Mailing Address			I 1981/1864 I/LE (BUTA 1811) BRILL BRILL BRILL BRILL BRICK LIBBL FRITA 1/60 I IRR	
					·	
518 BANYAN BLVD. W. PALM BCH FL 33401 W. PALM BCH FL 33401 W. PALM BCH FL 33401						
THE POTTE SHOT					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
	•				03/30/1998	
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21 26					05-08 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
27					5. Certificate of Status Desired Fee Required	
City & State City & State					6. Election Campaign Financing \$5.00 May Be	
23	28				Trust Fund Contribution Added to Fees	
Zip	Country Zip Cou			1	8. This corporation owes the current year Intangible	
24	. 25	29 3	0		Personal Property Tax.	
	9. Name and Address of Current	t Registered Agent	81	T 10	10. Name and Address of New Registered Agent	
COR	NING I AWIDENCE		61	Name		
CORNING, LAWRENCE			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
518 BANYAN BLVD.				'		
W. PALM BCH FL 33401			83	83		
			84	84 City 85 Zip Code		
		·		,	FL S E S E S E S E S E S E S E S E E	
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 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	PSTD . DELETE		1.1 TITLE		☐ Change ☐ Addition	
NAME	**L		1.2 NAME		:	
STREET ADDRESS	518 BANYAN BLVD.		1.3 STREE	TADDRESS	,	
CITY-ST-ZIP			1.4 CITY-S			
TITLE	W. FADIN BOTT TE COTO	☐ DELETE	2.1 TITLE	-	☐ Change ☐ Addition	
NAME		221			. •	
STREET ADDRESS	•			TADDRESS		
	· · · · · · · · · · · · · · · · · · ·		2.4 CITY-		·	
CITY-ST-ZIP .		☐ DELETE	3.1 TITLE	31-21	Change Addition	
NAME			3.2 NAME			
				TADDRESS		
STREET ADDRESS			3.4. CITY-	- 1		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	31-21	. Change Addition	
NAME	1		4. 2 NAME			
ļ	1 5 5 7 7			T ADDRESS		
STREET ADDRESS				i		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-S 5.1 TITLE	31-71L	Change Addition	
			5.2 NAME			
NAME				T ADDRESS	1.	
STREET ADDRESS			5.4 CITY-S		·	
CITY-ST-ZIP			6.1 TITLE	·· ·-	☐ Change ☐ Addition	
TITLE			6.2 NAME			
NAME	`			T ADDRESS		
STREET ADDRESS						
CITY-ST-7IP	İ		6.4 CITY-S	21-71L		

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:

561-833-1600