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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90048 010 \*\*\*150.00

<b>DOCUMENT</b>	# 298	1000030549
1. Compration Name		

$C_{\alpha}(\mathbb{P} \mathbb{P} \mathbb{P}^{\alpha})$	BRUNTIOUNZ, INC.				
Principal Place of Business	Mailing Address				
:2600 Douglas Road	_	_			
CORAL GABLES, Fl.	33134 Z	SAME	DO NOT WRITE IN TH  3. Date Incorporated or Qualifed	IS SPACE	
2 Delivery Division in the control of			412198		
2. Principal Place of Business	2a. Mailing Address	<u></u>	4. FEI Number   ASPPICTO FOR	<del></del>	lied For
Suite. Apt. #, etc.	Suite, Apt. #, etc.		T	\$8.75 A	Applicable
City & State	27		5. Certificate of Status Desired	Fee Rec	
23	City & State		c. Election Campaign Financing	\$5.00	May Be
Zip Country	28   Zip	Country	Trust Fund Contribution	Added to	
24	29	30	This corporation owes the current year	_ <del>-</del>	➡.
9. Name and Address	s of Current Registered Agent	1301	Personal Property Tax.  19 Name and Address of New Registers		No
<del>-</del>	wusl enterprises,	1 Name	12 Haine and Hadress of Hew Registers	a Agent	
CNS TOBETHE	BUSE ENTERPRISES.				
2600 Dougles Te	con, suite 400	82 Street Add	ress (P.O. Box Number is Not Acceptable)		
- ( m)-	C. 2212 1	83		<del> </del>	
CORNL GARRIES,	F1. 33137	84 00			
<u> </u>	,	84 City	<b>F</b>	85 Zip C	
11. Pursuant to the provisions of Section office or registered/agent or both in	ons 607.0502 and 607.1508, Florida Statut	es, the above-named con	<del></del>		registereg
agent. I am familiar with, and accept	the State of Florida. Such change was a principal particular of Section 607.0505, Fig.	uthorized by the corporational statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	cointment as reg	stered
SIGNATURE //				1	
			4/30	195	
Signature, typeg or printed name of		: Regissered Agent signature requir	93c  ea when reinstating) DATE	199	<del>-</del>
Signature, typeg or printed name of	FICERS AND DIRECTORS	13.	ad when reinstaung)  ADDITIONS CHANGES TO OFFICERS	AND DIRECTO	R3 IN 12
Stopfenure. Typegor printed name of 12.  TITLE DP	FICERS AND DIRECTORS	13. 1.1 TITLE		AND DIRECTO	
12. OF TITLE DP NAME RAPAGL L.	FICERS AND DIRECTORS  DELETE  MOLING	13. 1.1 TITLE 12 NAME			
STREET ADDRESS VITA CURA C	FICERS AND DIRECTORS  DELETE  MOLING  39 0	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS			
STREET ADDRESS VITACURA GOLD CITY-ST-ZIP SANTIACO	FICERS AND DIRECTORS  DELETE  MOLING  39 0	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change	Addriso
STREET ADDRESS VITACURA UTILE  CITY-ST-ZIP SANTIACO,  TITLE  DP  CITY-ST-ZIP SANTIACO,  TITLE  D/T/S	FICERS AND DIRECTORS  DELETE  MOLING  390  Chike	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE			Addriso
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SUPERIOR PROPERTY OF THE STREET ADDRESS VITACUDA 63 TITLE D/T/S CITY.ST.ZIP SANJINGO, C TITLE SANJINGO, C TITLE SANJINGO, C TITLE NAME STREET ADDRESS CITY.ST.ZIP TITLE NAME	FICERS AND DIRECTORS    DELETE     DELETE     DELETE     HUGO     O     DELETE     DELETE     DELETE     DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4.2 NAME		☐ Change	Addition
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SUPERIOR PROPERTY OF THE STREET ADDRESS VITA CURA GOTTILE DITTLE DITTLE SANTINGO CONTINUE STREET ADDRESS VITA CURA GOTTILE DITTLE DITTLE SANTINGO CONTINUE STREET ADDRESS CONT	FICERS AND DIRECTORS    DELETE     DELETE     HUGO     DELETE     DELETE     DELETE     DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP		☐ Change	Addition Addition
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SUPERIOR STREET ADDRESS CITY. ST. ZIP TITLE TO P  NAME TRAPAGL L STREET ADDRESS VITA CURA UTTACURA UTT	FICERS AND DIRECTORS    DELETE     DELETE     HUGO     DELETE     DELETE     DELETE     DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME		☐ Change	Addition Addition
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SIGNAME  TRAPAGE  TITLE  TO P  NAME  TRAPAGE  TREET ADDRESS  VITA CURA  CITY. ST. ZIP  SANTINGO  TITLE  NAME  STREET ADDRESS  CITY. ST. ZIP	FICERS AND DIRECTORS    DELETE     DELETE     HUGO     DELETE     DELETE     DELETE     DELETE	13.  1.1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS		Change	Addition Addition Addition
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SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR