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 COBPORATIONS

DOCUMENT #

1. Corporation Name DEVELOPMENT CORPORATION, INC

P 980000 385/2

33/29 Yo Mailing Address / SINGER

May 17, 1999 8:00 am Secretary of State

05-17-1999 90055 027 ***150.00

MIAMI FLORIDA	11950 NORTH APT O NORTH MIAM 2a. Mailing Address 26 11950 North	BAYShme DK	DO NOT WRITE IN TH	US SPACE
	KONTH MIAN	I ELA.	3. Date Incorporated or Qualifed	IIO OFACE
	74 6727 71 - 11-37-1	37/8/	APRIL 22 1988	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26 11950 NONT	4 Bayshow O	R 65-0835681	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		_	\$8.75 Additional
22	27 APT 2C		5. Certifcate of Status Desired	Fee Required
City & State	City & State	•	6. Election Campaign Financing	\$5.00 May Be
23	28 NORTH MI	4mi Fla	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	Intangible
24 25	29 33/8/	0 USA	Personal Property Tax.	□Yes 🗹 No
9. Name and Address	of Current Registered Agent		10. Name and Address of New Registere	d Agent
MARK SING	En	81 Name	ek SINGER	
11950 100	THE RANGE DA	82 Street Add	ress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
MAT 20	in ony suce on		N. BAGKORE DR	
Mar 10	TH BAYSLOR DR	83	- 70	
KLOPTH MIN	MI PLORIDA	7777	7 20	7. 0. 1-
	33/8/	84 City	TH MIRAI F	L 85 Zip Code / 33/8/
11. Pursuant to the provisions of Section	s 607.0502 and 607.1508, Florida Statutes		poration submits this statement for the purpose	
office or registered agent, or both, in	the State of Florida. Such change was aut	norized by the corporation	on's board of directors. I hereby accept the app	ointment as registered
744	the obligations of, Section 607.0505, Florid	Pasent,	President mi	/ / / / / /
SIGNATURE Signature, typed or printed name of its	edistered agent and title if andicable (NOTE: R	egistered Agent signature require	ed when reinstating) OATE	7/1995
	CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
			PRES, Secty, Trues. DIR.	
NAME MARY LUNA	POTENTER	1.2 NAME	MARK SINGER	
STREET ADDRESS 1550 BRICKE	CONTENTED TOOLETE	1.3 STREET ADDRESS	110 KD MORTH BAYShort	DR
OTTO CT 210 ALGO STATE	22/2 9	1.4 City-St-ZiP	11950 HORTH BAYSLAND KORTH MIAMI PLI	233181
CITY-ST-ZIP MIGAI PLA	DELETE	2.1 TITLE	TORY PARTIES TO	☐ Change ☐ Addition
NAME	_ beleve	2.2 NAME		_ onango
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	□ DELETE	2.4 CITY-ST-ZIP		Change
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		-
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4.2 NAME		
STREET ADORESS		4.3 STREET ADDRESS		}
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
πιε	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
OTD/ OT TIP		64 CITY- ST. 7ID]

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 13 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)