**PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P98000038898**

## FILED Apr 07, 1999 8:00 am Secretary of State 04-07-1999 90024 002 \*\*\*150.00

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Principal Place	e of Business	Mailing Address				- 1   Dill i Bill   (ib talat dill th aster affer aster affer	IM INIDI KATAN ININ	iffign cen seffi
16170 SADDLE		16170 SADDLE LANE						
WESTON FL 33326 WESTON FL 33326						DO NOT WRITE IN THE	S SPACE	
						3. Date incorporated or Qualifed	00,7100	
						04/29/1998		1
2 Principal Pi	lace of Business	Za, Mailing Address				4 FEI Number	Ap	plied For
21		26				15-0834558	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			•	5. Certificate of Status Desired	\$8.75 A	
22	_	27				5. Centricate of States Desired	Fee Re	quired
City & State	ومناجرة مستعد وفاروا والمعابد وورو فريوسترج	City-& State				6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added t	3 Pees
L Zip	Country	— Zip		untry		8. This corporation owes the current year is	ntangible ☐ Yes	ĎNo
24	25	29	30			Personal Property Tax.  10. Name and Address of New Registered		
	9. Name and Address of Curren	It Madistatan wasse		81 N	ame	10, 110110 2110 1100		
SAN	DS, LESLIE			بل		in a secondary		
16170 SADDLE LANE				82  S	treet Addre	tress (P.O. Box Number is Not Acceptable)		
WES	STON FL 33326			83				
Ì					· ·		85 Zip (	iode -
				84  C	ity	F!	L  °3	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	stutes, the E	above na	med corpo	eration submits this statement for the purpose of	of changing its	registered
	registered agent, or both, in the State im familiar with, and accept the obligation				corporation	n's board of directors. I hereby accept the app	Distriction Control	JISIO GG
SIGNATURE	and the same of the same through the first	<del></del>				92	2-19	<u> </u>
SIGNATURE	Signature, typed or printed name of registered ager				heriupen enuten	when reinstating) DATE	UR RIGGERTO	======================================
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	Change	RS IN 12
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NAME	しょんりつん せんかいほん	ANE		WANE				
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