PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90070 012 ***150.00

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i. Octoporation	MENT # P98000 IDDHA, INC.	0043020			_ LIEDLIEDG KIG IDIOLADAN DOKK DOKA	CO COL Ca lco Cocol Colo	11 01 14 0 44 0	II II I I I I.
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Principal Place	e of Business	Mailing Address			I (ESIJES) (14 ISIDI (BU) SEIII ABU)	ERIII BOILI SIGNE HIL	. 65166 112	17 00% 1007
3327 S DIXIE HWY 3327 S DIXIE HWY)			
DELRAY BEACH FL 33483-3254 DELRAY BEACH FL 33483-325			54	DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
					05/08/1998			
2, Principal P	Place of Business	2a. Mailing Address			4. FEI Number 65 - 083 635 3	2		ed For
21 26					65-003655		.75 Add	Applicable
Su te, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	ee Regu	
22 27 27 City & State City & State		City & State			6. Election Campaign Financing	\$ <u>.</u>	5.00 M	av Bo
23	City & State					dded to		
Ziç	Country Zip		Country					
24	25		10		Personal Property-Tax.	[i?Ye	5 <u>C</u>]No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Re	gistered Agent		
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MIA, NAZIMUDDIN 3327 \$ DIXIE HWY DELRAY BEACH FL 33483-3254			82	Street Addr	ress (P.O. Box Number is Not Acceptable	le)		·
			83	} -				
			_	<u> </u>		85	Zip Co	
			84	City		FLI	•	
11. Pursuant	to the provisions of Sections 607.050	12 and 607.1508, Florida Statutes	the above	e-named com	poration submits this statement for the pu	urpose of changi	ng its re	gistered
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was autorions of, Section 607.0505, Florid	nonzed by da Statutes	ine corporaus i.	on's board of directors. I hereby accept	are experies and	25 (Og.5	1
SIGNATURE		_			<u> </u>	DATE		
40	Signature, typed or printed name of registered age	IN and title if applicable. (NOTE: R	13.	nt signature redum	ad when reinstating) ADDITION S/CHANGES TO OFFI		ECTOR	S IN 12
12. TILE PA		114 PRESIDENT.					hange	Acidition
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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 furnier 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 only, that I am 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.

INTED HAME OF SIGNING OFFICER OR DIRECTOR