Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90020 011 \*\*\*150.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # POROCOA3354

1. Corporation TERRY L	. COUCH & ASSOCIATES			
Principal Place	of Business	Mailing Address		
9464 NW 11TH PLANTATION FI	= '	9464 NW 11TH ST. PLANTATION FL 33322		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				05/13/1998
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For Not Applicable
21		26		43 - 08 3 76 99   Not Applicable   \$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required
City & State		City & State		6 Election Compaign Financing \$5.00 May Pa
	5	28		Trust Fund Contribution Added to Fees
<b>23</b> Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	·	30	Personal Property Tax. Yes No
	9. Name and Address of Curre			10. Name and Address of New Registered Agent
	E. LAS OLAS BLVD. .AUDERDALE FL 33301		82 Street A	Address (P.O. Box Number is No Acceptable)
office or re agent. La	to the provisions of Sections 607.05 egistered agent, or both, in the State of familiar with, and accept the object.	02 and 607.1508, Florida Statute elof Florida. Sych change was at ations of, Section 607.0505, Flor	as, the above-named cuthorized by the corporida Statutes.	Corporation's board of directors. I hereby accept the appointment as registered
11. Pursuant office or nagent. January SIGNATURE	egistered agent, or both, in the Statem familiar with, and accept the objections.	elof Florida. Sych change was at attions of, Section 607.0505, Florida and title if applicate. (NOTE:	es, the above-named cuthorized by the corporida Statutes.	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered appointment as registered popular when reinstating)  DATE
office or re agent. La	egistered agent, or both, in the State of familiar with, and accept the object Signature, typed or printed name of contered agents.	elof Florida. Sych change was at attions of, Section 607.0505, Flor gent and title if applicable.  (NOTE: NDD DIRECTORS	es, the above-named cuthorized by the corporida Statutes.  Registered Agent signature re	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or nagent. La	egistered agent, or both, in the Statem familiar with, and accept the oblig  Signature, typed or printed name of the tered as  OFFICERS A	elof Florida. Sych change was at attions of, Section 607.0505, Florida and title if applicate. (NOTE:	es, the above-named outhorized by the corporate Statutes.  Registered Agent signature re-	corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered quired when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or nagent. La SIGNATURE	egistered agent, or both, in the Statem familiar with, and accept the oblig  Signature, typed or printed name of contered as  OFF CERS A  PSTD  COUCH, TERRY L	elof Florida. Sych change was at attions of, Section 607.0505, Flor gent and title if applicable.  (NOTE: NDD DIRECTORS	es, the above-named outhorized by the corporate Statutes.  Registered Agent signature re-	corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered quired when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or nagent.   all signature   12.	egistered agent, or both, in the Statem familiar with, and accept the oblig  Signature, yped or printed name of covered as  OFFICERS A  PSTD  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sych change was at attions of, Section 607.0505, Flor gent and title if applicable.  (NOTE: NDD DIRECTORS	ss, the above-named cuthorized by the corpolida Statutes.  Registered Agent signature re  13.  1.1 TITLE  1.2 NAME	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or nagent.   2   SIGNATURE   12.   TITLE   NAME	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFFICERS A PSTD COUCH, TERRY L 9464 NW 11TH ST. PLANTATION FL 33322	elof Florida. Signi change was at lettions of, Section 607.0505, Floridations of the floridation of the flor	Registered Agent signature re  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or n agent.   a SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD COUCH, TERRY L 9464 NW 11TH ST. PLANTATION FL 33322 D	elof Florida. Sych change was at attions of, Section 607.0505, Flor gent and title if applicable.  (NOTE: NDD DIRECTORS	Registered Agent signature re  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or n agent.	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD COUCH, TERRY L 9464 NW 11TH ST. PLANTATION FL 33322 D COUCH, TERRY L	elof Florida. Signi change was at lettions of, Section 607.0505, Floridations of the floridation of the flor	Registered Agent signature re  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or nagent. I all signature  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Signi change was at lettions of, Section 607.0505, Floridations of the floridation of the flor	Registered Agent signature re  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or nagent. I all agent. I all agent. I all agent. I all agent age	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD COUCH, TERRY L 9464 NW 11TH ST. PLANTATION FL 33322 D COUCH, TERRY L	elof Florida. Sinch change was at a titions of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the florida	Registered Agent signature red 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	Corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered
office or nagent. I all agent. I all agent. I all agent. I all agent age	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Signi change was at lettions of, Section 607.0505, Floridations of the floridation of the flor	Registered Agent signature re-  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 3.1 TITLE 3.1 TITLE 3.1 TITLE 3.1 TITLE 3.1 TITLE	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered    - / 9 - 9
office or nagent. I agent. I a	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at a titions of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the florida	Registered Agent signature re  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	Corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered
office or nagent. I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at a titions of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the florida	Registered Agent signature re  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	Corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered
office or nagent. I all agent. I all agent. I all agent. I all agent. I all agent all agent agen	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at attions of, Section 607.0505, Floridation of the framework of the floridation of the floridat	Registered Agent signature re  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	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
office or n agent. I	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at a titions of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the florida	Registered Agent signature re  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	Corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered
Office or nagent. I agent. I a	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at attions of, Section 607.0505, Floridation of the framework of the floridation of the floridat	Registered Agent signature re  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	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
office or nagent.   2 Signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at attions of, Section 607.0505, Floridation of the framework of the floridation of the floridat	Registered Agent signature re  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	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
office or in agent. I	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sign change was at attions of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Flo	Registered Agent signature re  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  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
office or nagent.   2 Signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sinch change was at attions of, Section 607.0505, Floridation of the framework of the floridation of the floridat	Registered Agent signature re  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  3.4 CITY-ST-ZIP  5.1 TITLE  5.1 TITLE	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
Office or nagent.   2 Signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sign change was at attions of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Flo	Registered Agent signature re  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	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
Office or nagent.   2 SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sign change was at attions of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Flo	Registered Agent signature re- 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 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	Corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered
Office or ragent. I a agent. I a	egistered agent, or both, in the State for familiar with, and accept the oblig Signature, typed or printed name of contered as OFF CERS A PSTD  COUCH, TERRY L  9464 NW 11TH ST.  PLANTATION FL 33322  D  COUCH, TERRY L  9464 NW 11TH ST.	elof Florida. Sign change was at attions of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Flo	Registered Agent signature re  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	Corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered

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 appears, with all other like empowered.

6.2 NAME

**6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS