## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Sporetary of State

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1999		DIVISION OF C	ORPORATI	ONS	FILED
DOCUMENT # P9800046669  1. Corporation Name JUNE PROJECT IV CORP.					99 1149 23 111 3: 52	
					SANTAL STATE	
Principal Place	e of Business	Maitir	ng Address			I INDIVINDE LINE HEIDE ERRIK DRINT BRINT BRINT BRINT DIREC BINNO RINNO RINNO HRIT HEIDE
7695 S.W. 1041 MIAMI FL 3315			7695 S.W. 104TH. STE. 210 Miami Fl. 33156			}
MIMMI FL 3313	o .	WIKM	rt 33130			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Princinal P	lace of Business		ailing Address			05/26/1998 4. FEI Number Applied For
21		26	, , , , , , , , , , , , , , , , , , ,			Not Applicable
Suite, Apt.	#, etc.	fer th	uite, Apt. #, etc.	•		5. Certificate of Status Desired   \$8.75 Additional
City & Stat		[27]	ity & State			Fee Required
23	•	28	ny a come			6. Efection Campaign Financing Trust Fund Contribution Trust Fund Contribution Added to Fees
Ζιρ	Country	71		Country		8. This corporation owes the current year Intangible
24	25 9. Name and Address	of Current Pegister		30]		Personal Property Tax [ ] Yes [ ] No  10. Name and Address of New Registered Agent
		of Content Register	eu Agein	81	Name	10. Halle alle Address of New Registered Agent
	MAN, ERIC 5 S.W. 104TH, STE. 210			82	Street Add	tress (P.O. Box Number is Not Acceptable)
	MI FL 33156	•				
				83		
				84	City	FL 85 Zip Code
office or r	to the provisions of Section registered agent, or both, in im familiar with, and accept	the State of Florida	Such change was au	thorized by	named corporati	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered.
SIGNATURE	Signature, typed or printed harne of n	euist-reit agent ann bheilt an	dicatio (NOTE	Reast-red Ages	t seriest de reinier	not when related on DATE
12.	OFF	ICERS AND DIRECT	era de la companya d	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP		( ) DELETE.	1.1 TITLE		[ ] Change [ ] Addition
NAME STREET ADDRESS	LITTMAN, ERIC P 7695 S.W. 104TH, STI	F 210		1.2 NAME 1.3 STREET	* * SYNDERE	
CITY-ST-ZIP	MIAMI FL 33156	L. 210		14 Cily-Si	ſ	
TITLE	··		[   DELETE	21 THTLE	1.51	[   Change
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET		
CITY-\$1-ZIP TITLE			[   DELETE	. 2 4 CITY-S 3 1 Till 6	1 - 200	7000028158072 -03/23/9901083 <sup>32</sup> -002 <sup>Addion</sup>
NAME.			( )	3.2 NAME	ļ	***1500.00 ****150.00
STREET ADDRESS	1			33 STREET	ADDRESS.	****1300,00 ****130.00
CITY-ST-ZIP			es con const	34 CITY-S	T - Z-11	
TITLE			[   DELETE	4 1 7 11 LF	ļ	[ ] Change [ ] Addition
NAME STREET ADDRESS				4 2 NAME 43 STREET	erimine es	
CITY-ST-ZIP				4.35 MC1 3	ſ	
TITLE			[]DETETE	5 1 TITLE		[ ] Change [ ] Addition
NAME				5.2 NAME	J	
STREET ADORESS				53\$IRFF	i i	_
City-ST-ZiP Title			[] DELETE	54 CITY-SI É 1 TITLE	1-216	( I Change / Warden
NAME			Libert	62 NAME	1	34
STREET ADORESS				6357HEE	(ADORESS	3/10
				FACULT ST	7.70	

14. Thereby 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 address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ERIGIP. LITTMAN

0/24/99 805) 443 8333