LE D DELETE 11 TITLE D/P/S/T Change Odduon ME REF ADDRESS 129W 11TH COURT 13 STREET ADDRESS 6 021 S U 367m CT 33314 V.ST.2P DAVIE FL 33325 DAVIE FL 340000 DAVIE FL 34000 DAVIE FL 340000 DAVIE FL 34000 DAVIE FL 340000 DAVIE FL 34000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 3400000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 3400000 DAVIE FL 3400000 DAVIE FL 340000 DAVIE FL 340000 DAVIE FL 3400000 DAVIE FL 34000000 DAVIE FL 34000000 DAVIE FL 34000000 DAVIE FL 340000000 DAVIE FL 340000000 DAVIE FL 3400000000 DAVIE FL 3400000000	F COR ANNU	NOW: FILING FE PROFIT PORATION IAL REPORT 1999		FLORIDA DEPAR <b>Katheri</b> Secretar	TMENT OF STATE	FILED May 06, 1999 8:00 am Secretary of State 05-06-1999 90147 003 ***150.00
Mailing Address     Mailing Address       WE FL 3332     11982 SW 11H COURT       DVE FL 3332     DVE FL 3332       Principal Place of Business     2a. Mailing Address       G O 2 L     S.W. 3 4 St.       D A T A B     27.       State, Act, FL     2a. Mailing Address       Child State     State, Act, FL       D A T A B     27.       State, Act, FL     28.       Child State     Corp State       D A T A B     27.       State, Act, FL     28.       Child State     Corp State       D A T A B     27.       D A T A A A A A A A A A A A A A A A A A	. Corporation	Name		368		. I DAVINA MANANA M
Principal Place of Business         Za         Mailing Address         Za         Mailing Address         4. FEB Number         Instrage         Applied Fir           Subb. Act. Act.         Not Applicable           MIDT ALL BL         Subb. Act. Act.         Subb. Act. Act. Act. Act. Act. Act. Act. Act	902 SW 11TH	COURT	11902	2 SW 11TH COURT		
C 0.2.1         S.W 36/T/L (T         20         6.0.2.1         S.W 36/T/L (T         1.5.0         Not Applicable         Not Applicable           Suite, 4., etc.         Applicable         State, 7.5         Assistantian         Fair PB         State, 7.5						05/22/1998
Apr + B       21       Apr - B       21       Apr - B       21       Control of the providence of the comparison of the compa	60.	21 SW 36TH	CT 26 0	6021 SW	36Th (7	65-0840506 Not Applicable
City & State       City / State       County       E. Election company Financing       Added to Fees         Zip       County       Tast Fund Contribution       Added to Fees         Zip       State mini-state fund Contribution       Tast Fund Contribution       Added to Fees         Zip       State mini-state fund Contribution       Tast Fund Contribution       Added to Fees         3. Name and Address of Current Registered Agent       Bhourth p       Tast Fund Contribution       Tast Fund Contribution         8. Name and Address of Current Registered Agent       B1       Name       Tast Fund Contribution       Name         9. Name and Address of Ocurrent Registered Agent       B1       Name       B1       Name       B2       Street Address of Now Registered Agent       B1         1902 SW 11Th COURT       DAVE FL 33325       B2       Street Address (P D Box Number Is Not Acceptable)       B2       Street Address (P D Box Number Is Not Acceptable)         1902 SW 11Th COURT       State of Finds Statutes, the above named corporations bard of directors. I hencely accept the appointment as registered agent, in minimary with and accept the obstate of Not Statutes, the above named contraction is statutes of the appointment as registered agent, in minimary with and accept the obstate of Not Statutes, the above named contraction statutes of the appointment as registered agent, in minimary with and accept the obstate of Not Statutes of Not Statutes (Statutes Conterminate) <t< td=""><td>Suite, Apt. #</td><td></td><td><u> </u></td><td>Suite, Apt. #, etc.</td><td>3</td><td></td></t<>	Suite, Apt. #		<u> </u>	Suite, Apt. #, etc.	3	
3.3.3.1/4       23       Buowher       23       Buowher       23       Buowher       23       Buowher       23       Buowher       23       Buowher       24       Descense of New Registered Agent       10.       Name and Address of New Registered Agent       10.       Name and Address of New Registered Agent         RLEY, KMBERLY 11902 SW 11TH COURT DAVE FL 33325       110.       Streat, Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).         1.       Pursuant to the provisions of Sections 607 0002 and 607.1506. Florida Statutes, the above-named corporation submer is not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).         I.       Pursuant to the provisions of Sections 607 0002 and 607.1506. Florida Statutes, the above-named corporation submer is not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).         I.       Pursuant to the provisions of Sections 607 0002 and 607.1506. Florida Statutes, the above-named corporation submer is not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Number is Not Acceptable).         I.       Pursuant to the provide date of the contable.       Impact Address (P.O. Box Number is Not Acceptable).       Impact Address (P.O. Box Numb		ie Fc		DAVIC	Fc	Trust Fund Contribution Added to Fees
9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       RILEY, KIMBERLY 11902 SW 11TH COURT DAVIE FL 33325     11. Name and Address of New Registered Agent       41. Pursuant to the provisions of Suctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation sournds this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-named corporation sournds this statement for the purpose of changing its registered office or registered agent, or notify the objective of Odder (1990). Currently and Point agent is registered office or registered agent on ongole by the origination of Section 607 0505, Florida Statutes, the above-named corporation sournds this statement for the purpose of changing its registered office or registered agent on ongole by the origination of Section 607 0505, Florida Statutes, the above-named corporation sournes the agent and a registered office or registered agent on ongole by the origination of Section 607 0505, Florida Statutes, the above-named corporation sournes the agent and a registered agent. I am Florida Statutes are registered agent. I			29 z	33314 Shown		8. This corporation owes the current year Intangible     Personal Property Tax.
11902 SW 11TH COURT DAVE FL 33325       Street Address (P.O. Box Number is Not Accuptable)       Charper B         83       60 C2 / S / S / S / S / S / S / S / S / S /		9. Name and Address of C	urrent Registe	red Agent		10. Name and Address of New Registered Agent
Biguinane, typed of phone name and the flapilicable       // (MCE Replayed Addre logication)       DATE         2       OFFICERS AND DIRECTORS       13       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         Lie       D       DELETE       11 TITLE       D////S/T       Change       Ordificions         Nee       RILEY, KIMBERLY       13 STREET ADDRESS       MEE NORESS       Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &		E FL 33325			83	
LE       D       DELETE       11 TITLE       D / P / S / T       Change       Indistion         ME       RILEY, KIMBERLY       13 STREET ADDRESS       G 021 S v 36 m, CT       33 314       13 STREET ADDRESS       G 021 S v 36 m, CT       33 314         Y-ST-ZP       DAVIE FL 33325       DELETE       21 Mule       DAVIE FL 33325       Change       Indistion         ME       DAVIE FL 33325       DELETE       21 Mule       DAVIE FL 33 324       Change       Indistion         V-ST-ZP       DAVIE FL 33325       DELETE       21 Mule       O' NEILC, Joséph       Indistion         ME       22 NAME       23 STREET ADDRESS       G 021 S W 36 mil CT       Indistion       Indistion         V-ST-ZP       24 GTV-ST-ZP       DAVIE FL 33374       Change       Addition         V-ST-ZP       24 GTV-ST-ZP       DAVIE FL 333314       Change       Addition         V-ST-ZP       DELETE       11 TITLE       Change       Addition         V-ST-ZP       DELETE       11 TITLE       Change       Addition         V-ST-ZP       DELETE       4 GTV-ST-ZP       Change       Addition         V-ST-ZP       DELETE       11 TITLE       Change       Addition         V-ST-ZP       DE	<ol> <li>Pursuant t office or re agent. I an</li> </ol>	to the provisions of Sections 60 gistered agent, or both, in the n familiar with, and accept the	State of Florida	. Such change was au	s, the above-named	<b>DAVIE</b> FL 333/4 corporation submits this statement for the purpose of changing its registered
ME       PILEY, KIMBERLY         11902 SW 11TH COURT       13 STRETADRESS         DAVIE FL 33325       14 CITV-ST.2P         DAVIE FL 33325       14 CITV-ST.2P         ME       21 TITLE         VF.ST.2P       24 CITV-ST.2P         DELETE       21 TITLE         21 NAME       0 DELETE         31 NTLE       0 DELETE         32 NAME       0 DELETE         33 STREET ADDRESS       0 DELETE         34 CITV-ST.2P       0 DELETE         42 CIAVAE       0 DELETE         33 STREET ADDRESS       0 DELETE <td>1. Pursuant t office or re agent. I an IGNATURE</td> <td>to the provisions of Sections 60 agistered agent, or both, in the n familiar with, and accept the Signature, typed or printed name of registe</td> <td>State of Florida. obligations of, S Dun. L</td> <td>Such change was au lection 607.0505, Flon Limbury <u>S</u> pplicable. (NOTE:</td> <td>s, the above-named thorized by the corpo da Statutes Augustered Agent signature r</td> <td>JAVIC     FL     333/4       corporation submits this statement for the purpose of changing its registered wation's board of directors. I hereby accept the appointment as registered       Lab     4-30-49       upured when reinsteting)     DATE</td>	1. Pursuant t office or re agent. I an IGNATURE	to the provisions of Sections 60 agistered agent, or both, in the n familiar with, and accept the Signature, typed or printed name of registe	State of Florida. obligations of, S Dun. L	Such change was au lection 607.0505, Flon Limbury <u>S</u> pplicable. (NOTE:	s, the above-named thorized by the corpo da Statutes Augustered Agent signature r	JAVIC     FL     333/4       corporation submits this statement for the purpose of changing its registered wation's board of directors. I hereby accept the appointment as registered       Lab     4-30-49       upured when reinsteting)     DATE
TY-ST-ZP       DAVIE FL 33325       14 CTV-ST-ZP       DAVIE FL 33321       Change       DAVIE FL 33314         LE       DELETE       21 TTLE       V P       Change       Change       Indicion         ME       22 NAME       Change       Change       Indicion         ME       23 STREET ADDRESS       23 STREET ADDRESS       G 2 J S W 36 TFJ C T       24 CTV-ST-ZP       DAVIE J FL       33 314         LE       DELETE       31 TTLE       DAVIE J FL       33 314       Change       Addition         ME       DELETE       31 TTLE       DAVIE J FL       33 314       Change       Addition         ME       DELETE       31 TTLE       DAVIE J FL       33 314       Change       Addition         ME       32 STREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS       Change       Addition         Y-ST-ZP       OLETE       41 TTLE       Change       Addition         ME       OLETE       41 TTLE       Change       Addition         Y-ST-ZP       OLETE       41 TTLE       Change       Addition         Y-ST-ZP       OLETE       51 TTLE       Change       Addition         NET ADDRESS       SSTREET ADDRESS       SSTREET ADDRESS <t< td=""><td>1. Pursuant t office or re agent. I an IGNATURE</td><td>to the provisions of Sections 60 agistered agent, or both, in the n familiar with, and accept the Signature, typed or printed name of register OFFICER</td><td>State of Florida. obligations of, S Dun. L</td><td>Such change was au lection 607.0505, Flom <u>inbuly</u> <u>S</u> pplicable. (NOTE: TORS</td><td>s, the above-named thorized by the corpo da Statutes Agistered Agént signature r 13.</td><td>Corporation submits this statement for the purpose of changing its registered     cation's board of directors. I hereby accept the appointment as registered     Corporation guided when reinstating)     DATE     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</td></t<>	1. Pursuant t office or re agent. I an IGNATURE	to the provisions of Sections 60 agistered agent, or both, in the n familiar with, and accept the Signature, typed or printed name of register OFFICER	State of Florida. obligations of, S Dun. L	Such change was au lection 607.0505, Flom <u>inbuly</u> <u>S</u> pplicable. (NOTE: TORS	s, the above-named thorized by the corpo da Statutes Agistered Agént signature r 13.	Corporation submits this statement for the purpose of changing its registered     cation's board of directors. I hereby accept the appointment as registered     Corporation guided when reinstating)     DATE     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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ME 62 NAME 62 NAME 63 STREET ADDRESS 64 CITY- ST- ZIP 1 barrabu cost/64 that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Elorida Statutes, I further certify that the information	. Pursuant t office or re agent. I an GNATURE :  KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS	to the provisions of Sections 60 agistered agent, or both, in the n familiar with, and accept the Signature, typed or brinted name of regeld OFFICEF D RILEY, KIMBERLY 11902 SW 11TH COURT	State of Florida. obligations of, S Dun. L	Such change was au lection 607.0505, Flor pplicable. TORS DELETE DELETE DELETE	s, the above-named thorized by the corpu- dar Statutes Registered Agent signature f 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 3.4 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	Image     Image       Image
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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	1. Pursuant t office or re agent. I an IGNATURE : 2. LE ME REET ADORESS TY-ST-ZIP TLE ME REET ADORESS TY-ST-ZIP TLE ME REET ADORESS TY-ST-ZIP TLE ME REET ADORESS TY-ST-ZIP TLE ME	to the provisions of Sections 60 agistered agent, or both, in the n familiar with, and accept the Signature, typed or brinted name of regeld OFFICEF D RILEY, KIMBERLY 11902 SW 11TH COURT	State of Florida. obligations of, S Dun. L		s, the above-named thorized by the corpu- da' Statutes Registered Agent signature r 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 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	Image     Image       Image