PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 01, 1999 8:00 am Secretary of State 04-01-1999 90114 020 ***150.00

DOCUN 1. Corporation	MENT # P98000	047	526							
	OLDINGS, INC.						1			
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<i>y</i>										
Principal Place	of Business	Mailir	ng Address				-{ 1 (188) (180) sin (ësh) (sin) qanis sa	iah ed asa ab uah di	ATT SABET REITE	HIBNA BH: HRM1
			WEST DIXIE HIGH	YAY]			
18317 WEST DI	BEACH FL 33160									
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			H MIAMI BEACH FL				DO NOT WRI	TE IN THIS	SPACE	
							3. Date incorporated or Qualifed			ŀ
							05/26/1998 4. FEI Number			plied For
2. Principal Place of Business 2a. Malling Address						650837552			t Applicable	
21			Suite, Apt. #, etc.				02-0.37302		\$8.75	
Suite, Apt. i	#, etc.	₁	uite, Apt. #, etc.				5. Certificate of Status Desired		Fee Re	- 1
Chy & State		27 - C	ity & State				6. Election Campaign Financing		\$5.00	May Bo
	3	28	ny a omio				Trust Fund Contribution		Added t	
Zip Country			Zip Country				8. This corporation owes the curry	ant year Inta	ngible	-
24	25	29	•	30			Personal Property Tax.		[]Yes	□No
4-1	9. Name and Address of Currer		ed Agent				10. Name and Address of New R	egistered A	gent	
					81 N	ame				1
	CHIN, DAVID C.P.A.				82 SI	reet Adon	ess (P.O. Box Number is Not Accepta	ble)		
	WEST BROWARD BLVD.	•		!	Y -					
	E 200				83					
PLAN	NTATION FL 33324				84 C	itv			85 Zip (Code
					I - I	•		<u>FĻ</u>		
11. Pursuant i office or re agent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	02 and 607. of Florida. ations of, Se	1508, Florida Statu Such change was ection 607.0505, Fl	ites, the ai authorized orida Stati	bove-na I by the utes.	corporatio	oration submits this statement for the n's board of directors. I hereby accep	t the appoin	intentas re	gistered
SIGNATURE										1
SIGNATIONE,			- Aug 1	F. B 1	A 1 - 1		Labora resince Material	DAYE		i
	Signature, typed or printed name of registered age			_ <u></u>	Agent sign	eture required	when reinstating) ADDITIONS/CHANGES TO OF	DAYE	DIRECTO	RS IN 12
12.	OFFICERS AN			E: Registered		neture required	when reinstating) ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
12.	OFFICERS AN		ORS	13.	n.e	neture required				
12. TITLE NAME	OFFICERS AN PD SHAALTIEL, YORAM		ORS	13. 1.1 TII 1.2 N	TLE WAE					
12. TITLE NAME STREET ADDRESS	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS	13. 1.1 TH 1.2 Nº 1.3 ST	TLE NACE RESET ADD	RESS				
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP	OFFICERS AN PD SHAALTIEL, YORAM		ORS	13. 1.1 TH 1.2 Nº 1.3 ST	TLE NAME RESTADO TY-ST-ZIP	RESS				
12. TITLE NAME STREET ADDRESS OTTY-S1-ZIP TITLE	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. f.1 TH 12N ⁴ 13 ST 14 CF	TLE NAME REET ADO TY-ST-ZIP	RESS			[] Change	A:xdition
12. TITLE NAME STREET ADDRESS CITY-S1-2IP TITLE NAME	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TII 12 N/ 13 ST 14 CF 2.3 TII 22 N/	TLE NAME RESET ADD TY-ST-ZIP TLE	RESS			[] Change	A:xdition
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TII 12 Nº 13.57 14 Cr 2.3 TII 22 Nº 23 ST	TLE REET ADD TY-ST-ZIP TLE WEET ADD	RESS			[] Change	A:xdition
12. TITLE NAME STREET ADDRESS CITY-S1-2IP TITLE NAME STREET ADDRESS CITY-S1-ZIP	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TII 12 Nº 13.57 14 Cr 2.3 TII 22 Nº 23 ST	ILE TY-ST-ZIP ILE WHE REET ADD TY-ST-ZIP ILE TY-ST-ZIP	RESS			[] Change	A:xdition
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CF 2.3 TII 2.2 NA 2.3 ST 2.4 CF	TLE TY-5T-ZIP TLE TREET ADD TY-5T-ZIP TLE TREET ADD TY-5T-ZIP	RESS			[] Change	Addition
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CT 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA	TLE TY-5T-ZIP TLE TREET ADD TY-5T-ZIP TLE TREET ADD TY-5T-ZIP	RESS			[] Change	Addition
12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1:1111 12.NA 13.51 14.CI 2:111 22.NA 23.ST 2.4.CI 3:1111 32.NA 33.ST	TLE TREET ADD TY-5T-ZIP TLE TREET ADD TTY-5T-ZIP TLE TREET ADD TTY-5T-ZIP	RESS RESS			[] Change	Addition
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME NAME	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1:1111 12.NA 13.51 14.CI 2:111 22.NA 23.ST 2.4.CI 3:1111 32.NA 33.ST	REET ADD TY-5T-ZIP TLE WASE REET ADD TTY-ST-ZIF REET ADD	RESS RESS			[] Change	Addition
12. TITLE NAME STREET ADDRESS CITY-S1-2IP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP STREET ADDRESS CITY-S1-ZIP	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE DELETE	13. 1.1 TIT 12 NA 1.3 ST 1.4 CF 2.7 TI 22 NA 2.3 ST 2.4 CF 3.1 TM 32 NA 3.3 ST 3.4 CF	ILE WAE REET ADD TY-5T-ZIP ILE WAE REET ADD TY-ST-ZIP ILE WAE THE THE THE THE THE THE THE	RESS RESS			[] Change	Addition Addition
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12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE DELETE	13. 1.1 TIT 12 NA 1.3 ST 1.4 CF 2.7 TIT 22 NA 2.3 ST 2.4 CF 3.1 TIT 32 NA 3.3 ST 3.4 CF 4.1 TIT 4.2 NA 4.3 ST	ILE REET ADD TY-ST-ZP ILE WEET ADD TY-ST-ZP TLE WEET ADD TY-ST-ZP TLE AME REET ADD	RESS			[] Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TITI 1.2 NA 1.3 ST 1.4 CC 2.1 TIT 2.2 NA 2.3 ST 2.4 CC 3.1 TIT 3.2 NA 3.3 ST 4.4 CC 4.4 CC 4.4 TIT 4.2 NA 4.3 ST 4.4 CC	ILE REET ADD TY-ST-ZP ILE WE REET ADD TY-ST-ZP ILE AME REET ADD TY-ST-ZP ILE AME REET ADD	RESS			[] Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1 TIII 1.2 NA 1.3 ST 1.4 CC 2.5 TIII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 4.2 CC 4.1 TI 4.2 NA 4.3 ST 4.4 CC 5.1 TII 5.2 NA	ILE REET ADD TY-ST-ZP ILE WE REET ADD TY-ST-ZP ILE AME REET ADD TY-ST-ZP ILE AME REET ADD	RESS			[] Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-91-ZIP TITLE NAME STREET ADDRESS CITY-91-ZIP TITLE NAME STREET ADDRESS CITY-91-ZIP TITLE NAME NAME NAME	OFFICERS AN PD SHAALTIEL, YORAM 3600 WESTMINSTER STREET		ORS DELETE	13. 1.1TIII 1.2 NA 1.3 ST 1.4 CC 2.1TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 4.2 NA 4.3 ST 4.4 CC 5.1 TII 5.2 NA 5.3 ST 5.3 ST	ILE WIE REET ADD TY-ST-ZP ILE WIE REET ADD TY-ST-ZP ILE AME REET ADD TY-ST-ZP ILE MME REET ADD TY-ST-ZP ILE MME REET ADD TY-ST-ZP ILE MME	RESS	ADDITIONS/CHANGES TO OF	FICERS ANI	[] Change [] Change [] Change	Addition Addition Addition
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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.

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