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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000048195

1. Corporation Name

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90162 013 ***150.00

DATATE	on Ghour, INC.			
Principal Place	of Business	Mailing Address		\$ 10011005; tra rates 10711 60117 60311 00117 40171 01001 10101 11610 18101 0115 1061
5418 TAFT STR	•	5418 TAFT STREET		
		HOLLYWOOD FL 33021		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				05/29/1998
2. Principal Pl	ace of Business	2a. Mailing Address	16551	4. FEI Number Applied For
21		26 V.O. VOX O	16551	65-0839504 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired
22		27		
City & State		City & State 28 HOLLY WOOD	FL.	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
23	Country	Zip Zip	Country .	This corporation owes the current year Intangible
Zip	Country	29 33081-655130		Personal Property Tax.
24	9. Name and Address of Current			10. Name and Address of New Registered Agent
	a. Maine and Address of Current	r contrato on trigonic	81 Name	
AMERILAWYER				
343 ALMERIA AVENUE			82 Street A	ddress (P.O. Box Number is Not Acceptable)
	AL GABLES FL 33134		83	
	·			
	,		84 City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes, t	the above-named c	orporation submits this statement for the purpose of changing its registered
	egistered agent, or both, in the State on the state of the colligation of the colline of th	of Florida. Such change was authorions of, Section 607.0505, Florida		orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
office or re agent. I as		of Florida. Such change was authorions of, Section 607.0505, Florida	Statutes.	ation's board of directors. Thereby accept the appointment do regioned
office of re agent, I as	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent	of Florida. Such change was authorions of, Section 607.0505, Florida	Statutes.	quired when reinstating) DATE
office or reagent. I as	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS	Statutes. Istered Agent signature rec	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or reagent. I as SIGNATURE 12.	egistered agent, or both, in the State of m familiar with, and accept the obligat. Signature, typed or printed name of registered agent OFFICERS ANI PSTD	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS	Statutes. iistered Agent signature rec 13. 1.1 TITLE	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or r agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS	Statutes. 13. 1.1 ITTLE 1.2 NAME	ation's board of directors. Thereby accept the appointment to registered quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or reagent. I as SIGNATURE 12. TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS	Statutes. Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or r agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. D DIRECTORS D DELETE	Statutes. Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ation's board of directors. Thereby accept the appointment to registered quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or r agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. D DIRECTORS D DELETE	Statutes. 13. 1.1 ITILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ation's board of directors. Thereby accept the appointment to registered quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or ragent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. D DIRECTORS D DELETE	Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or r agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. D DIRECTORS D DELETE	Statutes. 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	ation's board of directors. Thereby accept the appointment to registered quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or r agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS DELETE	Istered Agent signature rec 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	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or r agent. 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 of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS DELETE	Statutes. 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	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or ragent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS DELETE	Statutes. 13. 1.1 ITTLE 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	aulired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or ragent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	of Florida. Such change was authorions of, Section 607.0505, Florida t and title if applicable. (NOTE: Reg D DIRECTORS DELETE	Statutes. 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 3.3 STREET ADDRESS	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
office or r agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE	Statutes. 13. 1.1 ITTLE 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 3.4 CITY-ST-ZIP 3.5 NAME 3.5 NAME 3.5 NAME 3.6 CITY-ST-ZIP	aulired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or ragent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE	Statutes. 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 4.1 TITLE 4.1 TITLE 4.1 TITLE	aulired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or in agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE	Statutes. 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 4.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or ragent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE	Statutes. 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 5.1 TITLE	aulired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office of it agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE	Statutes. 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	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or in agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE	Statutes. 13. 1.1 ITTLE 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 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office of it agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE DELETE	Statutes. 13. 1.1 ITTLE 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 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 NAME 5.3 STREET ADDRESS 5.5 STREET ADDRESS 5.5 CITY-ST-ZIP	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Change Change Change Change Change
office of raggent. I ail SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE	Istered Agent signature rec 13. 1.1 ITTLE 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 6.1 TITLE 6.1 TITLE 6.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office of raggent. I ail SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE DELETE	Istered Agent signature rec 13. 1.1 ITTLE 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 3.3 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 4.5 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Change Change Change Change Change
office of ragent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI PSTD MINOR, JANLET 5418 TAFT STREET	DELETE DELETE DELETE	Istered Agent signature rec 13. 1.1 ITTLE 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 6.1 TITLE 6.1 TITLE 6.1 TITLE	autired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Change Change Change Change Change

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 suppliemental 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:

UNANDSTANINGED FOR HAME OF SIGNING OFFICER OR DIRECTOR