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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000048691**1. Corporation Name

FRONT ROW RENTALS INC.

Princi	pai Pia	ice of	Busine
516 S.	DIXIE	HWY.	
LAVE	WORT	4 E1 4	22460

Mailing Address

FILED May 08, 1999 8:00 am Secretary of State

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2. Principal Place of Business 2a. Mailing Address 2a. Maili						SPACE
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Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Status Desired Status Desired Section Campaign Financing S.5.00 May Be Additional Status Desired S.5.00 May Be Additional Status Desired Agent S.5.	2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc. 27	21		26 P. O. Box	x 427	65-0839887	
City & State	·····	#, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired	T
20	22			v		
28	_ `	e		T11 11	11	
28		Country	Zip	Country		
9. Name and Address of Current Registered Agent VEGA, LUCILA 516 S. DIXIE HWY. LAKE WORTH FL 33460 82 Sireet Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. and accept the obligations of, Section 607.0507 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In affiliar with, and accept the obligations of, Section 607.050. Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PO COAKLEY, ROBERT 12. WAME COAKLEY, ROBERT 12. WAME COAKLEY, ROBERT 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. WAME COAKLEY, ROBERT 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. WAME COAKLEY, ROBERT 12. SIGNET ADDESS 13. SIRECT ADDESS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. WAME COAKLEY, ROBERT 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. WAME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. WAME COAKLEY, ROBERT 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIRECT ADDESS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. LE WEGA, LUCILA 12. WAME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIRECT ADDESS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. LE WEGA, LUCILA 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Change Addition 10. Name 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIRECT ADDRESS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_ `		— <i>•</i> • • • □	¬ '		☐ Yes ☐ No
VEGA, LUCILA 518 S. DDIE HWY. LAKE WORTH FL 33460 84 City FL ST Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fibride Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered signit, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered signit, and sected the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 11 TITLE DOBERT SIREET ADDRESS 32. HERMOSA CA 90254 14. CITY-ST-ZP HERMOSA CA 90254 14. CITY-ST-ZP TITLE VP DELETE 21 TITLE CAMPENS AVENUE \$205 14. CITY-ST-ZP LAKE WORTH FL 33460 2. VAME SIREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 DELETE 31 TITLE COAKLEY, ROBERT 32. NAME SIREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 DELETE 31 TITLE COAKLEY, ROBERT 32. STREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 DELETE 31 TITLE COAKLEY, ROBERT 13. STREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 DELETE 31 TITLE COAKLEY, ROBERT TITLE ST OBLIEFT ST OBLIEFT ST ST OBLIEFT ST STREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 DELETE 31 TITLE COAKLEY, ROBERT TITLE ST STREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 DELETE 31 TITLE COAKLEY, ROBERT ST OBLIEFT ST STREET ADDRESS CITY-ST-ZP LAKE WORTH FL 33460 Change Addition TITLE Change Addition	241					Agent
516 S. DIXIE HWY. LAKE WORTH FL 33460 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PO				81 Name		
TILE PO GARLEY, ROBERT STREET ADDRESS ALUCILA				82 Street Add	dress (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Sections 607.1502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change is registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered signal agent, and accept the obligations of, Section 607.6905, Florida Statutes. SIGNATURE						
11. Pursuant to the provisions of Sections 607 0500 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, and caregit the obligations of, Section 607.0505, Florids Statutes. SIGNATURE Signature, typed or printed name of registered agent and 1956 if applicable (MOTE Registered Agent signature required when rematisting) DATE 12. OFFICER'S AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PO DELETE 1: TITLE CHANGE SIGNATURE SIGNATURE PROPERTY STATE SUPPLY STATE STA	LAK	: WUKIN FL 33460		83		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and armiller with an advanced the obligations of, section 607.0508, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PO COAKLEY, ROBERT 320 HERMOSA AVENUE #205 HERMOSA CA 90254 14. CITY-ST-ZP NAME STREET ADDRESS 14. STREET ADDRESS 15. STREET ADDRESS 16. STREET ADDRESS 17. STREET ADDRESS 18. STREET ADDRESS				84 City	FI	85 Zip Code
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SIGNATURE Signature. Typed or printed rame of registered agent and title if applicable. (NOTE Registered Agent signature required when renatisting) DATE	l office or re	egistered agent, or both, in the State of	t Florida. Such change was auth	orized by the corporat	ion's board of directors. I hereby accept the appoi	ntment as registered
12.		or regional				
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TILE	<u> </u>				ADDITIONS/CHANGES TO OFFICERS AF	
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6.4 CITY-ST-ZIP CITY-ST-ZIP 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 address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

OF SIGNING OFFICER OR DIRECTOR