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 # **P98000048950**1. Corporation Name

MICHAELEEN BURNS & ASSOCIATES, INC.

Mailing Address

FILED

99 SEP 30 PM 3: 28

SECRETARY OF STATE
TALLAHASSEE, PLORIDA



Principal Prace of Business Mailing Address			+ 100 LINO I LIBERT MAINT ONNI ONNI ONNI ONNI ONNI ONNI ONNI O				
1428 BRICKELL AVENUE SUITE 204 MIAMI FL 33131	1428 BRICKELL AVENUE SU MIAMI FL 33131	1428 BRICKELL AVENUE SUITE 204		DO NOT WRITE IN TH	IS SPACE		
				3. Date Incorporated or Qualifed 06/01/1998	0.7.02		
Principal Place of Business	2a, Mailing Address 26			4. FEI Number 65-0854/52		Applied For Not Applicab	
Suite Apt #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		5 Additional Required	
City & State	City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zφ Country	Ζιρ [29]	Country 30		This corporation owes the current year I Personal Property Tax.	intangible	X No	
9. Name and Address of	Current Registered Agent			10. Name and Address of New Registere	d Agent		
		81	Vame				
DAUM, JOHN ALLEN		82	Street Add	ress (P.O. Box Number is Not Acceptable)			
10512 SW 137TH PLACE				(15. Dox Humber is Not Acceptable)			
MIAMI FL 33186		83					
		84	City		. 85 Z	ip Code	
		1-1	,	poration submits this statement for the purpose on's board of directors. I hereby accept the app	Lli		
SIGNATURE Styristime, typical or printed name of regist 12. OFFICE	tered agent and title if applicable. (NOTE F	tegistured Agent si	gnature require	ADDITIONS/CHANGES TO OFFICERS A	AND DIREC	77 TORS IN 12	
III.E D	[DELETE	1.1 TITLE	1 (lice, PRESIDENT	☐ Chan		
BURNS, MICHAELEEN		1.2 NAME		MIROS SCHELD	./	•	
THEFT ACTORESS 1428 BRICKELL AVENUE	SUITE 204	1.3 STREET AD	DRESS /4	228 Beickell Ave HZO	0		
MIAMI FL 33131	f I believe	1.4 CITY-ST-Z	* * -	410M1, FL 33131	Ly	r 98	
HT.F	[] DELETE	21 TITLE	_	SECRETARY TREASURER	[] Chang	ge 🔣 Add	
ATT TRACE ASSESS		2 2 NAME		OBERT SEITZ 428 BRICKELL AVE # 20	14		
(PA SEZIE)		2 3 STREET AD 2 4 CITY-ST-2		478 BRKKELL AVE # CC MIAMI FL 93131	· S.	200	
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(40):		3 2 NAME			E.J 77 %	. 2,744	
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· MA		4 2 NAME		***************************************	। नाग्यानाना		
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AM		62 NAME					
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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 justee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changes, at on an attachment with an address, with all other like empowered.

SIGNATURE:

305 377. 1881