PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Mar 11, 1999 8:00 am Secretary of State 03-11-1999 90022 013 ***150.00

DOCUMENT# DOROGOS7142

Principal Place of Business	Mailing Address								
204 PARK PLACE JUPITER FL 33458 - JUPITER FL 33458				DO NOT	umite iki tuli	- enace			
				3. Date incorporated or Qua	WRITE IN THIS	SPACE			
				06/25/1998					
2. Principal Place of Business	2a. Mailing Address	3		4, FEI Number			<u> </u>	lied For	
21	26			65-084913	20	60 7		Applicable	-
Suite, Apt. #, etc.	Suite, Apt. #, et	C.		5. Certificate of Status Desire	ed 🗆		e Reg	iditional uired	
City R State	City & State			6. Election Campaign Finance	cina —			lay Be	
City & State	28			Trust Fund Contribution			ded to		
ZipCountry	Zip	Cour	ntry	_8, This corporation owes the	current year in		رحم		
24 25	29	30		Personal Property Tax.		Yes		No	
9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of N	iew Kegistered	Agent			
CAHL, CHRISTINE S		Į	-						
204 PARK PLACE		ļ	82 Street Add	Iress (P.O. Box Number is Not Acceptable)				ļ	
JUPITER FL 33458		•	83						
		ļ				85	Zip Co	ode	
•	02 and 607.1508, Florida e of Florida, Such change pations of, Section 607.050	Statutes, the at was authorized 5, Florida Statu	ove_named.cor by the corporatites.	poration submits this statement fo ion's board of directors. I hereby a	r the purpose of accept the appoint of the appoint	f,changin Antment a	<u>o its n</u> as regi	egistered istered	- -
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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 othertific empowered.

6.4 CITY-ST-ZIP