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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 14, 1999 8:00 am Secretary of State 04-14-1999 90009 044 ***150.00

DOCUMENT # **P98000058833**

	AGRANCE DEPOT OF MIA	IVII, IIVO.								
Principal Plac	e of Business	Mailing Address		-	1 1001116	0) 118 10181 E111 86111 0	BITT OFFIE BOINT	III EE TETOU TOTO	I HANGE SHALLOW	
1 '	UNRISE BOULEVARD	12801 WEST SUNRISE BOU	LEVARD							
STORE #201 STORE #201				_			TT 144 T1 110	00105		
SUNRISE FL 33323 SUNRISE FL 33323						DO NOT WR		SPACE		=
ł						oorated or Qualifed	1		. [
					07/01/19				plied For	
<u></u>	Place of Business	2a. Mailing Address			T TELLINATION	PLIED FO)p		ot Applicable	
21		26	26 Suite Apt # etc						Additional	
Suite, Apt. #, etc.		27	├ ──			of Status Desired			equired	
City & Sta		City & State	حصورة		E Election C	ampaign Financing		\$5.00	May Be	
23		28				Contribution			to Fees	
Zip	Country	Zip	Country	y		ration owes the cur	rrent year Int	angible		
24	25	29	30			roperty Tax.	•	ŬYes	□No	
-	9. Name and Address of Curre				10. Name and	Address of New	Registered .	Agent		
			81	Name					1	
	SMAN, DAVID		82	Street /	Address (P.O. Box Nu	mher is Not Accen	table)			
202	1 TYLER STREET		62	Sueer	Address (1 .O. Dox 14d)	moor to recep				
HOl	LYWOOD FL 33020		83	3						
			-	1 02				85 Zip	Code	
			84	1 City			FL	. [] `	}	
11Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the aboy	/e-named	corporation submits th	is statement for the		changing its	registered	
11. Pursuant office or	to the provisions of Sections 607.00 registered agent, or both, in the Stal	502 and 607.1508, Florida Statute te of Florida. Such change was all gations of Section 607.0505. Flor	es, the abou uthorized by ida Statute		corporation submits the oration's board of direc	is statement for the tors. I hereby acce		changing its ntment as re	registered egistered	
1	to the provisions of Sections 607.0 to the provisions of Sections 607.0 to the provisions of Sections 607.0 to the provision of the provision	502 and 607.1508, Florida Statutt te of Florida. Such change was at gations of, Section 607.0505, Flor	es, the about thorized by ida Statute		corporation submits the oration's board of direction	is statement for the tors. I hereby acce	e purpose of opt the appoi	changing its ntment as re	registered gistered	_ `
_11. Pursuant office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the oblight of the Statem of the State	SMAN			required when reinstating)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	e purpose of apt the appoint	7		- ·
1	Signature, typed or printed name of registered a	SMAN gent and title if applicable. (NOTE: AND DIRECTORS			required when reinstating)	is statement for the stors. I hereby access	e purpose of apt the appoint	D DIRECTO	DRS IN 12	(00)
SIGNATURE	Signature, typed or printed name of registered a	SMAN gent and title if applicable. (NOTE:	Registered Age		required when reinstating)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	e purpose of apt the appoint	7		(44,00)
SIGNATURE	Signature, typed or printed name of registered a OFFICERS / PD CAPELLA, JOHN W	gent and title if applicable. (NOTE: AND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ent signature n	required when reinstating)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	e purpose of apt the appoint	D DIRECTO	DRS IN 12	700/14/00)
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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, oppn an attachment with an address, with all other like empowered.

SIGNATURE: