PROFIT CORPORATION ANNUAL REPORT

1999

TITLE NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000058908

1. Corporation SCHIRRA	Name	0000	,00								
Principal Place	e of Business	Mailing	g Address				Liffiller on dirt lein gate and a				
4574 DYER BLV WEST PALM BE	/D., BAY #'S 3 & 4 EACH FL 33407	4574 DYER BLVD BAY #'S 3 & 4 West Palm Beach Fl 33407									
							DO NOT WRITE	IN THIS SI	PACE		
					_		3. Date incorporated or Qualifed 07/01/1998				
2. Principal P	lace of Business	2a. Ma	ailing Address		-		4. FEI Number 65-0855150			Nied For	
21		26					63-0833120			Applicable	
Suite, Apt.	#, etc. / 35 ~ 6		ite, Apt. #, etc.	2.4	+6		5. Certificate of Status Desired	<u> </u>	\$8.75 A		
City & Stat	e ·	- Cli	ly & State		-	ن- بستيه ،	- 6 Election Campaign Financing == [-\$5.00 ı		<u></u>
23		28					Trust Fund Contribution		Added to	Fees	
Zip	Country	Zip	ס		untry		8. This corporation owes the current			□No (
24	25	29		30	-		Personal Property Tax. 10. Name and Address of New Reg			<u> </u>	
	9. Name and Address of Current	t Registere	ed Agent		81 Name	_	N -44		1515		
SCH	IIRRA, JOHN J III					_ <u>D</u>	MUIS PLOTKIN		·		
	4 DYER BLVD., BAY #'S 3 & 4				82 Street	l Addre	335 (P.O. Box Number is Not Acceptable		5-6		
	ST PALM BEACH FL 33407				83	7-3-	712701 4				
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					84 City	e et	TOMM & BANH	FL	85 Zip C	ode IO	
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11. Pursuant office or i	to the provisions of Sections 607,0502 registered agent, or both, in the State of	2 and 607.1	1508, Florida Statu	ites, the a		T 2 2 oqroo b	ration sybmits this statement for the pure bears of directors. I hereby accept the		33	ו כסו	
		2 and 607.1 of Florida. Stions of, Se	1508, Florida Statu Such change (438 i ction 607.0505, Fl	ites, the a authorize prida Sta		T2 2	retion submits this statement for the pure beart of directors. I hereby accept the		33	ו כסו	
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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 cath; 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 NO MINER PORTO CONTEST

3.0.00

245-1379

FILED

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90175 016 ***150.00