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PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 2000 P98000061823 DOCUMENT #

FILED Mar 30, 2000 8:00 am Secretary of State

03-30-2000 90004 003 ***150.00

| \mathcal{T} | HIES COMPUT | er sustem. | 5 , $\pm NC_{1}$ | | |
|---------------------------------|---|---------------------------------------|----------------------------------|--|---------------------------------------|
| , | 7.7.2.3 (22.7) | - 000 | , | 6 8 6 6 | i h h |
| | | | | 8288 | 3 9 8 |
| Principal Plac | ce of Business | Mailing Address | - | | |
| | | | | | |
| | | | | DO NOT WRITE IN TH | IIC CDACE |
| | | | | | IIS SPACE |
| | | | | 3. Date Incorporated or Qualified | a 5/ |
| 0 Di | Place of Business | 2a. Mailing Address | | July /4, /9: | Applied For |
| 2. Principal F | ace of Business | ¬ ^ | 1. DYTHAW | 65-0851468 | Not Applicable |
| Suite, Apt. | | 26 13305, u Suite, Apt. #, etc. | 9. 127 AVC | | \$8.75 Additional |
| 301te. Apr. | <u> </u> | 27 | | 5. Certificate of Status Desired | Fee Required |
| City & Stat | - | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| ¬```` ^ • | 0 -1.01 | 28 MINNI F | 10 cccl n | Trust Fund Contribution | Added to Fees |
| 3 // / | Country | Zip | Country | 8. This corporation owes or has paid the | |
| 331 | 45 25 (1SA | 29 33145 30 | USH | Personal Property Tax due June 30 | ☐ Yes ☐ No |
| <u>라</u> :카딩 | 9. Name and Address of Current Re | egistered Agent | | 10. Name and Address of New Register | ed Agent |
| | David S. Thies - | Dresident | 81 Name | - | |
| _ | DAVIOU J. IVITES - | prosiden | 82 Street Addre | ess (P.O. Box Number is Not Acceptable) | |
| | 1330 S.W. 29th Miami, Florida | AUC. | 52 Street Addre | ass (II.O. Box Number is Not Acceptable) | |
| • • | 0 0 1 | 23145 | 83 | | |
| | MIAMILFIORION | . 00.13 | | <u> </u> | |
| | | | 84 City | F | 85 Zip Code |
| 11 Pursuant | to the provisions of Sections 607 0502 an | nd 607.1508. Florida Statutes, the | he above-named corpo | oration submits this statement for the nurgos | e of changing its registered |
| office or r | registered agent, or both, in the State of F im familiar with, and accept the obligation | lorida. Such change was autho | orized by the corporation | on's board of directors. I hereby accept the a | ppointment as registered |
| agent. + a | im ramiliar with, and accept the obligation | is or, section our coos, monda | Statutes. | | |
| SIGNATURE . | Signature, typed or printed name of registered agent an | d title if applicable (NOTE, Reg | gistered Agent signature require | ed when reinstating) DATE | · · · · · · · · · · · · · · · · · · · |
| 12. | OFFICERS AND D | · · · · · · · · · · · · · · · · · · · | 13. | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTORS IN 12 |
| TITLE | Dresident: | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | David S. Thies | • | 1 2 NAME | | |
| STREET ADDRESS | 1330 S.W. 19th Ave. | | 1 3 STREET ADDRESS | | |
| CITY-ST-ZIP | Miani, Florida 3 | 3145 | 1.4 CITY - ST - ZIP | | |
| TITLE | SECNETACH: | ☐ DELETE | 2 1 TITLE | | ☐ Change ☐ Addition |
| NAME , | David 5. Thies | | 2 2 NAME | _ | |
| STREET ADDRESS | 1330 S.W. 28th Aul | | 2 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 2 4 CITY-ST-ZIP | | |
| TITLE - | Trensurer: | | .3.1 TITLE | | Change Addition |
| NAME | Daulds. This | | 3 2 NAME | | |
| STREET ADDRESS | 1330 S.W. 29th au | 2 | 3 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3 4 CITY-ST-ZIP | | |
| TITLE . | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 4 1 TITLE | | ☐ Change ☐ Addition |
| NAME | <u></u> | | 4 2 NAME | | , |
| STREET ADDRESS | | | 4 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4 4 CITY-ST-ZIP | | |
| TITLE | | | 5 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5 4 CITY - ST - ZIP | | |
| TITLE | | | 6 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6 2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| STREET ADDRESS | | | O D OTHER MODILEGO | | |

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 13 if changed, or on a spacetiment with an address.