Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90090 026 ***150.00

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 # P98000062880

1. Corporation Name

AB & C GROUP OF SOUTH FLORIDA, INC.

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Principal Place	e of Business	Mailing Address					1 ! ! ! ! ! ! ! ! ! !	I CIO IBIOI COLSI DOSIL C	INII PAIKI NAIIA			101 40 11 F 00 1
13406 SOUTHWEST 128TH STREET 13406 SOUTHWEST 128TH S MIAMI FL 33186 MIAMI FL 33186												
		•						DO NOT WE		SPACE		 _
							1 5.	orated or Qualife	d			
							07/16/199				т.	P. 15.
2. Principal Place of Business 2a. Mailing Address							4. FEI Number 65 - 0851696				4	lied For
21 26 Suite Art # etc							65-0	<u></u>	¢o.		Applicable	
Suite, Apt. #, etc.							5. Certificate of Status Desired Fee Required					
22 27 City & State City & State							a Floation Cor	mpaign Financing				May Be
23 28 28							Trust Fund		' _□			Fees
Zip	Country	Zip	Coun	itry				ation owes the cu	rrent vear Int	angible		
24	25	29	30	·			Personal Pr		, , , , , , , , , , , , , , , , , , , ,	Yes	; ;	No
	9. Name and Address of Curre							Address of New	Registered	Agent		
				81	Name							
	RILAWYER		ŀ	82	Street A	ddres	ss (P.O. Box Num	ber is Not Accer	itable)			
343 ALMERIA AVENUE												
COR	AL GABLES FL 33134		ſ	83	,							
	,		F	84	City					85	Zip C	ode
	to the provisions of Sections 607.050		. 1	İ					FL	- \ \		
SIGNATURE	m familiar with, and accept the obligation familiar with a second fam	ant and title if applicable. (NOTE:	Registered A			quired v	when reinstating)	CHANGES TO O	DATE ELICEDS AN	אט טופנ	CTO	2S IN 12
12.	OFFICERS AND DIRECTORS PD □ DELETE			13. 1.1 TITLE			ADDITIONS/	CHANGES TO O	FFICERS AL	Cha	ange	Addition
TITLE	FARNELL, DEBORAH R						RRELL	7200	AIL 7	,,	Ū	
NAME .	ANADO COLITICATOR ACCTU OTDEET			1.3 STREET ADDRESS			IRREUL	INEGOE	74 F	•		I.
STREET ADDRESS	MIAMI FL 33186			1.4 CITY-ST-ZIP								
CITY-ST-ZIP	VD .	☐ DELETE	2,1 1111		1-21					☐ Cha	ange	Addition
NAME	PRANDINI, RANDY			2.2 NAME								
STREET ADDRESS	ANADA COLUTI PARCAT ACOTAL OTDEET			2.3 STREET ADDRESS								
CITY-ST-ZIP	MIAMI FL 33186		2.4 CIT				•	~		7 - ~	-	
TITLE	SD DELETE		3,1 7171							Chi	ange	☐ Addition
NAME	PRANDINI, CRAIG J		3.2 NA	ΜE								
STREET ADDRESS		TREET	3,3 STF	REET	ADDRESS							
CITY-ST-ZiP	MIAMI FL 33186		3.4. CIT	Y-S	T-ZIP							
TITLE	TD	☐ DELETE	4,1 TTI		╗					Ch	ange	☐ Addition
NAME	FARRELL, ROBERT C		4. 2 NA	ME								
STREET ADDRESS	· ·	TREET	4.3 STF	REET	ADDRESS							
CITY-ST-ZIP	MIAMI FL 33186		4,4 CFT	Y-ST	r-zip							
TITLE		☐ DELETE	5.1 717							☐ Ch	ange	☐ Addition
NAME	1		5.2 NA		ļ							
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP			5.4 CIT		r-ziP							
TITLE		☐ DELETE	6.1 TTT							☐ Ch	ange	☐ Addition
NAME			6.2 NA	ΜE								

CITY-ST-ZIP 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 true see 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 man attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS