## 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 # P9800063229

1. Corporation Name

INTRASC	OPE COMMUNICATION	NS, INC.										
Principal Place	e of Rusiness	Mailing Ad	idress									6 (())(4 (1)() (0)()
· · · · · · · · · · · · · · · · · · ·												
2840 SW 132 PLACE 2840 SW 132 PLACE MIAMI FL 33175 MIAMI FL 33175												
								DO NOT WRITE IN THIS SPACE				
								3. Date incorpo		ed		
								<u> 07/17/199</u>	<u>8</u>			
2. Principal P	lace of Business	2a. Mailing	g Address				1	4. FEI Number	60m			pplied For
21		26					_	65-	0850	<u> </u>		ot Applicable
Suite, Apt.	#, etc.	Suite, a	Suite, Apt. #, etc.					5. Certificate of Status Desired   \$8.75 Additional Fee Required				
City & Stat	e	City &	City & State					6. Election Can	npaign Financin	g 🖂	\$5.00	May Be
23		28						Trust Fund C	Contribution		Added	to Fees
Zip	Country	Zip		Cou	untry			8. This corpora	tion owes the c	urrent year Int		_
24	25	29	29		30			Personal Property Tax. Yes ☐ No				∐No
	<ol><li>Name and Address of C</li></ol>	urrent Registered A	gent				•	10. Name and A	Address of Nev	v Registered	Agent	
0.00		DDDIOTO NIO			81	Name						
CORPORATE CREATIONS ENTERPRISES, INC.					82 Street Addr			(P.O. Box Num	ber is Not Acce	ptable)		~*
4521 PGA BOULEVARD #211					0.000,100			·				
PALN	M BEACH GARDENS FL 334	118			83							
					84	City					85 Zip	Code
						,				FL	.	
office or n agent. I a	to the provisions of Sections 60 egistered agent, or both, in the m familiar with, and accept the	State of Florida. Such	n change was a	uthoriże	d by	the corpo	corpora oration's	tion submits this board of directo	statement for to	ne purpose of cept the appoi	changing it ntment as r	s registered egistered
SIGNATURE	Signature, typed or printed name of registe	red agent and title if applicable	e. (NOTE	: Registered	d Agen	nt signature re	equired wh	en reinstating)		DATE		
12.		RS AND DIRECTORS				13.		ADDITIONS/C	HANGES TO	OFFICERS AN	ID DIRECT	ORS IN 12
TITLE	Ď		□ DELETE	1.1 T	ΠLE						Change	Addition
NAME	SUAREZ, RICHARD			1.2 N	IAME							Ì
STREET ADDRESS	2840 SW 132 PLACE			1.3 \$	TREET	ADDRESS						
CITY-ST-ZIP	MIAMI FL 33175			1.4 0	TY-S	T-ZIP	!				,	
TITLE		· · · · ·	☐ DELETE	2.1 T	TILE						☐ Change	☐ Addition
NAME				2.2 N	IAME							}
STREET ADDRESS				2.3 S	TREET	TADORESS						}
C/TY-ST-ZIP				2.40	CITY-S	T-ZIP						
TITLE		-	` DELETE	3.1 T	TILE	-	-	• .			Change	. Addition
NAME				3.2 N	IAME	1						
STREET ADDRESS				3.3 S	TREET	TADDRESS						
CITY-ST-ZIP				3.4. 0	CITY-S	ST-ZIP						
TITLE	,		☐ DELETE	4,1 T	TLE						☐ Change	Addition
NAME				4.21	NAME							Í
STREET ADDRESS				4.3 S	TREET	TADDRESS						
CITY-ST-ZIP				4.4 0	CITY-S	T-ZIP						
TITLE			DELETE	5.1 T							☐ Change	Addition
NAME				5.2 N	IAME							•
STREET ADDRESS				5.3 S	TREE	TADDRESS						Ì
CITY-ST-ZIP				5.4 0	TY-S	T-ZiP						İ
TITLE			DELETE	6.1 T	ITLE						☐ Change	Addition
NAME				6.2 N	IAME							į

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 truster imposes 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 actives, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ONE INC TED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90083 004 \*\*\*150.00