

**PROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

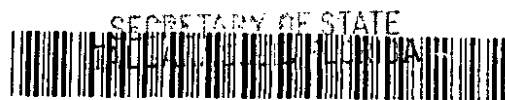
DOCUMENT # P98000067471

1. Corporation Name
START ME UP, INC.

Principal Place of Business
**12335 N.W. 56TH COURT
CORAL SPRINGS FL 33076**

Mailing Address
**12335 N.W. 56TH COURT
CORAL SPRINGS FL 33076**

99 DEC 20 PM 12: 04



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1998

4. FEI Number

65-0863380

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 12592 Pines Blvd

2a. Mailing Address

26 SAME AS #2

Suite, Apt. #, etc.

22 #102

Suite, Apt. #, etc.

23 PEMBROKE PINES, FL

City & State

24 33065 **25 USA**

Zip Country

29 **30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BONNIN, WILLIAM E
12335 N.W. 56TH COURT
CORAL SPRINGS FL 33076**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

William E. Bonnin
Signature, typed or printed name of registered agent and to whom applicable.

(NOTE: Registered Agent signature required when reinstating)

8 APR 1999
DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

12. PD ☐ DELETE
NAME BONNIN, RUDOLPH E
STREET ADDRESS 17 STONE EDGE ROAD
CITY-ST-ZIP BEDMINSTER NJ 07921

13. 1.1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

900003088289--9
-01/05/00--01009--019

12. SD ☐ DELETE
NAME HAZAN, JENNIE ANN
STREET ADDRESS 17 STONE EDGE ROAD
CITY-ST-ZIP BEDMINSTER NJ 07921

2.1 TITLE
22 NAME
23 STREET ADDRESS
2.4 CITY-ST-ZIP

******158.75 ****158.75**

12. VTD ☐ DELETE
NAME BONNIN, WILLIAM E
STREET ADDRESS 12335 N.W. 56TH COURT
CITY-ST-ZIP CORAL SPRINGS FL 33076

3.1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

12. ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

12. ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

12. ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William E. Bonnin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 APR 1999
Date

954-441-1222
Daytime Phone #