PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am Secretary of State

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Principal Place		Mailing Add										
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							08/10/1998					Į.
2 Principal Pl	ace of Business	Za. Mailing	Address				4. FEI Number			Ap	plied For]
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24	25	29	[30	•		Personal Property Tax	ι		Yes	□No]
	9. Name and Address of Current						10. Name and Address	of New Reg	istered A	gent		⇃
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	IZ, JACK					treet Addre	ss (P.O. Box Number is Not Acceptable)				······································	1
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117 FUISUAIL	anistant and a set of both in the Chris	d Clarida Such	change was all	thorizon	4 her tha	corporatio	n's board of directors. I here	by accept the	ne appoint	ment as re	gistered	i
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	to the provisions of Sections 607:0502 egistered agent, or both, in the Stafe of m familiar with, and accept the boligati	ions of, Section	607.0505 Flori	da Stat	utes.			. 1	-204	19		
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	Signifies, typed or printed name of registered agent OFFICERS AND	and \$10 if applicable.	(NOTE:	Registered	Agent Pig			/_	DATE	DIRECTO	RS IN 12	11/98)
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SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP	Signification by private name of regulared agest OFFICERS AND	O DIRECTORS	(NOTE:	13. 1.1 II 1.2 N 1.3 S ² 1.4 Cl	TLE AME TREET AD	ORESS	I when reinstating)	/_	DATE	DIRECTO	RS IN 12	CR2E034 (11/98)
SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE	Signification by posted name of registered agests OFFICERS AND RREF JACK HETT 110 FOX ARC LN- 0205 MM PL 349 SUCR TREF-	O DIRECTORS	(NOTE:	13. 1.1 II 1.2 N 1.3 S' 1.4 Cl 2.1 II	TLE AME TREET AD TY-ST-ZI	ORESS	I when reinstating)	/_	DATE	DIRECTO	RS IN 12	CR2E034 (11/98)
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6.4 CITY-ST-ZIP 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 cath; that I am an officer or director of the corporation or the acceiver 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

STREET ADDRESS