## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 19, 1999 8:00am

**Secretary of State** 

02-19-1999 90038 008 \*\*\*150.00

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000074114

NAME

STREET ADDRESS

CITY-ST-ZIP

Zip Country Zip Country Zip Country Age	JW CA	RPENTRY, INC.							
Mailing Address   Mailing Ad	Ì								
FI. LAUDEROALE FI. 33311  FI. LAUDEROALE FI. 33311  DO NOT WRITE IN THIS SPACE  3. Date hocoprosted or Qualified  08/24/1998  4. FEI Number   Applied For Not	Principal Pla	ace of Business	Mailing Address	·		'	1 18811881 (10 1910) /0//1 88//7 88//7 88//7	HOLLI HOOM OF GROOM HE	i ianii <b>die</b> l i <b>an</b> i
2. Principal Place of Business   2a. Mailing Address   2a. Mailing	3591 NW 17 STREET 3591 NW 17 STREET					!			
2. Principal Place of Business			THE BIODENDALE TE SSOT	•			DO NOT WRITE IN T	HIS SPACE	
2. Minispape Place of Business 2. Mainty Address						3,		770	
22   25   26   35.75 Additional Country   27   28   35.75 Additional Country   35.75 Additional Co						_i		,	
Suite, Apt. #, etc.	<b>—</b>	Place of Business	—			4	FEI Number	A	pplied For
27   City & State		t # etc				!	249-84-8876		<del>'''</del>
State		<del>,,</del> 0.0.				5.	Certifcate of Status Desired		
23   28   27   29   20   29   30   25   20   20   20   20   20   20   2		ate	·				Floring Committee Fire		
Zip Country Zip Country Zip Country 8, This corporation owes the current year intangible per personal Property Tax.   vs   vs   vs   vs   vs   vs   vs   v	23					_  _b;	Trust Fund Contribution		
24		Country		Country	у	8			to rees
WALLACE, JOSEPH 3591 NW 17 STREET FT. LAUDERDALE FL 33311  82 Street Address (P.O. Box Number is Not Acceptable)  83   Received a provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the appointment as reg	24			30		1			□No
WALLACE, JOSEPH 3591 NW 17 STREET 1. AUDERDALE FL 33311  82 Street Address (P.O. Box Number is Not Acceptable)  83 STREET ADDRESS CTY-ST-ZP TITLE NAME STREET ADDRESS CTY-ST-ZP STREET ADDRESS STREET ADDRESS CTY-ST-ZP STREET ADDRESS STREET	<del></del> -	9. Name and Address of Curre	ent Registered Agent			10.	Name and Address of New Register	ed Agent	
3591 NW 17 STREET FT. LAUDERDALE FL 33311    83	WA	LLACE JOSEPH		81	1 Name	1			
## City   FL   85   Zip Code    11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, or both, in the State of Florida, Statutes.    SIGNATURE		The state of the s		82	Street Add	ress (P	2.O. Box Number is Not Acceptable)		· · · · · · · · · · · · · · · · · · ·
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 1 am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or proteid name of registered agent and site of application. (NOTE; Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  WALLACE, JOSEPH  12 NAME  13 STREET ADDRESS  TITLE  13 STREET ADDRESS  TITLE  22 NAME  22 NAME  22 NAME  23 STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  33 STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  41 TITLE  Change Addition Addition AND STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  33 STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  34 STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  35 STREET ADDRESS							,		
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SIGNATURE					I -		<u> </u>	•       '	
12. OFFICERS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   PD						ł			
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			☐ DELETE	4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET	T-ZIP ADDRESS			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 the empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP