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PROFIT CORPORATION ' ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000076312 1. Corporation Name

SEPTEMBER RESOURCES IV, INC.

Principal Place of Business Mailing Address				;		
7695 S.W. 104TH STREET SUITE 210 MIAM! FL 33156		7695 S.W. 104TH STREET SUITE 210 MIAMI FL 33156				
					DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualifed	
2 Principal F	Place of Business	The Tarabia Additions	-		09/01/1998	1.00
	lace of busiless	2a, Mailing Address			4. FEt Number	Applied For
Suite Apt	# etc	Suite, Apt #, etc.	•			Not Applicable
22		27			5. Certificate of Status Besired []	\$8.75 Additional Fee Required
City & Star	e	City & State		;	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year li	
24	25	29 3	0		Personal Property Tax	[.] Yes [. No
	9. Name and Address of Current	Registered Agent	- I		10. Name and Address of New Registered	
			81 N	ame	·	
LITTMAN, ERIC P					GLO Bay Novel as a No. Association	
7695 S.W. 104TH STREET SUITE 210				reet Addres	ss (F.O. Box Number is Not Acceptable)	
MIAI	WI FL 33156		83		•	
			84 Ci	ity	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	I I , the above na	nied corpor.	ation submits this statement for the purpose o	□ [] of changing its registered
	egistered agent, or both, in the State of m familiar with, and accept the obligation			corporation:	audif sumities this statement for the purpose c 's board of directors. I bereby accept the appo	ointment as registered
SIGNATURE	The trial and the properties of the	113 67, Occiden 601:0000, Florid	in Statutes.			
SIGNATURE	Signature, typed or printed name of registered agost a	nd title if applicable (NOTE Re	egišteřed Ajel t sign	abare required w	On temstalogy DATE	(a)
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	SPO	[]DELETE	1.1 THE			[] Change [] Addition
NAME	LITTMAN, ERIC P		1.2 NAME			
STREET ADDRESS	7695 S.W. 104TH STREET SUIT	E 210	13 STREET ADOR	RESS		
CITY-ST-ZIP	MIAMI FL 33156		1.4 C(TY-ST-2)F			
TITLE		(. DELETE.	217111.6	[[] Change [] Addition
NAME			2.2 NAME		700002819 -03/23/991	7678
STREET ADDRESS			23 STREET ADDR	RF SS	-03/23/99-1	01082608
CITY-ST-ZIP			2 4 CITY-ST-ZIP		***1200.00	****150.00
TITLE		[] DELETE	3.1 TITLE			[Change
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDR	RESS		
CITY-\$T-ZIP			34 C(TY-S1-ZiP			
TITLE		[] DECETE	4 1 TITLE		•••	[Change
NAME			4 2 NAME			
STREET ADDRESS			4 3 STREET ADDR	RESS		
C/TY-ST-Z)P			44 CITY-ST-ZIP			
TITLE		[] DELETE	5 1 TILLE			[] Change
NAME			5.7 NAME			
STREET ADDRESS			53STREET ADDA	KFSS		

14. Thereby 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employeed 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

ERIC P. LITTMAN