PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000080229

1. Corporation Name

NEARCO DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address							- + 100111001 (10 1010) (011) 001) 001) 001	- IÅRII AARKA IIAIA I	
1541 S.W. 56TH AVENUE 1541 S.W. 56TH AVENUE PLANTATION FL 33317-5330 PLANTATION FL 33317-5330			,						
			FL 33317-5330				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualifed	- SI AOL	
							09/16/1998		
2 Principal D	lace of Business	2a. Mailing A	ddress				4 FEI Number	T Apr	plied For
	igos of Dualifiess	26	au, 000				65-0865695_	<u> </u>	t Applicable
Suite, Apt.	# etc.	Suite, Apt	. #, etc.					\$8.75 A	dditional
22		27					5. Certificate of Status Desired	Fee Red	quired
City & Stat	te	City & Sta	ate				6. Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip		Country	,—-		8. This corporation owes the current year in		
24	25	29	3	0			Personal Property Tax.		⊠ No
	9. Name and Address of Curre	ent Registered Age	nt				10. Name and Address of New Registered	Agent	
FICE	ICD ALICHETHE III			81	Nar	ne			
FISHER, AUGUSTUS III				82	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)		
1541 S.W. 56TH AVENUE PLANTATION FL 33317-5330				_					
FUN	MINION FE 33317-3330			83	1				
				84	City		Fi	85 Zip C	ode
					<u></u>				registered
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat	502 and 607.1508, F e of Florida. Such cl	iorida Statutes hange was aut	, the above horized by	e-nam the o	rporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	intment as rec	gistered
agent. I a	im familiar with and accept the oblig							^	
SIGNATURE	- H/2 (4	<u>a </u>	Alston Fi	sher	ш_		. I-13-91	1	\
12.	Signature, typed of printed name of registered at	AND DIRECTORS	(NOTE: N	13.	nt signal	nia iadmiad	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D		DELETE	1.1 TITLE				[] Change	☐ Addition
NAME	FISHER, AUGUSTUS III			1.2 NAME		Ì			ì
STREET ADDRESS	ARAA A ME CATH AMENDE			1.3 STREE	T ADDRI	ESS			
CITY-ST-ZIP	PLANTATION FL 33317-5330			1.4 CITY-S			•		
TITLE	D		DELETE	2.1 TITLE		1		Change	☐ Addition
NAME	FISHER, MERIDETH			2.2 NAME					
STREET ADDRESS	APAR OTH COTTLE AND PARTY			2.3 STREET	T ADDR	ESS			
CITY-ST-ZIP	PLANTATION FL 33317-5330			2. 4 CITY-S					
TITLE	TEATIAN ON TE OSOTI COOS		DELETE	3.1 TITLE				Change	☐ Addition
NAME									
STREET ADDRESS				3.3 STREE	TADDR	ESS			
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME .				4. 2 NAME				***	
STREET ADDRESS	,			4 3 STREE	TADOR	ESS			
CITY-ST-ZIP				44 CITY-S	ST-ZIP			٠ ٦	
TITLE			DELETE	5.1 TITLE			•	Change	☐ Addition
NAME				5.2 NAME		- [
STREET ADDRESS				5.3 STREE	TADDR	ESS			
CITY-ST-ZIP				5.4 CITY-S	ST-ZIP_				
TITLE			DELETE	6.1 TITLE		- }		Change	Addition
NAME				6.2 NAME					
	4			63 STREE	TANDR	ESS			

6.4 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 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 the attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Mar 01, 1999 8:00 am Secretary of State

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