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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90120 027 ***150.00

DOCUMENT	#	P98000082986
. Corporation Name		. 0000000

941 MADEIRA STREET	7941 MADEIRA STREET
IIRAMAR FL 33023	MIRAMAR FL 33023
Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.

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3.	Date incorporated or Qualified	
	09/24/1998	
4,	FEI Number	Applied For
	65-0863498	Not Applicable

DO NOT WRITE IN THIS SPACE

		26		65-0063470	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #	f, etc.	5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State		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 y	vear Intangible ☐ Yes ☐ No

9. Name and Address of Current Registered Agent FENGER, CHERYL V 7941 MADEIRA STREET MIRAMAR FL 33023

	10. Name and Address of New Regis	tered A	gent		
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 607.1508, 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					DATE		
	Signature, typed or printed name of registered agent and title if applicable		gistered Agent signature r		HANGES TO OFFICERS	AND DIRECTOR	2S IN 12
12.	OFFICERS AND DIRECTORS		13.		HANGES TO OFFICERS	Change	Addition
TITLE	PD	☐ DELETE	1.1 TITLE	PD	(AC) (1 AC)		L Addition
NAME	FENGER, CHERYL V		1.2 NAME	FENGER CT	IERYL R. IRA STREET		
STREET ADDRESS	7941 MADEIRA STREET		1.3 STREET ADDRESS	7941 MADE	IRA STREET	n-02	
CITY-ST-ZIP	MIRAMAR FL 33023		1.4 CITY-ST-ZIP	MIKAMAK,	FLORIDA 3		
TITLÉ		☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME			2.2 NAME				
STREET ADDRESS	راهم المناسب المنطقة المستوم أسياد الرسال	پوده د سخت	2.3 STREET ADDRESS		F - ~	S.	- ,
CITY-ST-ZIP			2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 πn.E			☐ Change	☐ Addition
NAME			3.2 NAME				'
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP		.,.		
TITLE -		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 πτLE			Change	Addition
NAME	·		6.2 NAME				
CTOCKT ADDDECC			6.3 STREET ADDRESS				

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.

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP