PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 16, 1999 8:00 am Secretary of State 04-16-1999 90069 013 ***150.00

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Principal Place	•	Mailing Address			- [
2 INTRACOASTAL WAY LAKE WORTH FL 33460 LAKE WORTH FL 33460						· ·				
DAVE MOULD	FE 33-400	DATE WOMEN TE SOME				DO NOT WRIT	E IN THIS SE	PACE		,
		•			i	3. Date incorporated or Qualified				Ì
3. Principal D	tace of Business	2a. Mailing Address				09/23/1998 4. FEI Number		App	lied For	
21 2450	^	<u> </u>			ì	65-0865299			Applicable	١,
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		1
22		27	- -			<u> </u>		Fee Rec		!
City & State		City & State			l	Election Campaign Financing Trust Fund Contribution		\$5.00 H Added to		
23 WEST PALM BEACH FL 28 Zip Country Zip Country				y		8. This corporation owes the current year Intancible				
24 33415 25 PALM BEACH 29 30						Personal Property Tax.				
	9. Name and Address of Current I	Registered Agent		41 11		10. Name and Address of New R	egistered Ag	jent		ł
RED	MAN, LARRY		8	1 Name						j .
2 INTRACOASTAL WAY				2 Street A	Address	(P.O. Box Number is Not Acceptal	ole)			
	E WORTH FL 33460		18	3						{
			با	 				85 Zip Ci	ada .	,
]8	1			FLI	1		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes,	, the abo	ve-named o	corpora	tion submits this statement for the p	purpose of cha	anging its r	egistered istered	1
Office or n	egistered agent, or boun, in the State of m familiar with, and accept the obligatio	ns of Section 607.0505. Florid	a Statute	y uso curpo 15.	иация	Odgio of directors: I morely docep-	DIO ZPPONIMI			l
						1	. f.			
SIGNATURE	Jany Bern	an/	_	_		3/	6, 199			
SIGNATURE	Signature, typed or printed fighter of registered agent a	and title if applicable. (NOTE: Re	egistered Ag	eni agnature re	equired wh		6 99	DIRECTOR	 RS IN 12	(86)
	Jany Bern	and title if applicable. (NOTE: Re	_	eni agnature le	equired with	an reinstating) ADDITIONS/CHANGES TO OFF	6 99 ICERS AND I	DIRECTOR	RS IN 12	(11/98)
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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 as 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.

SIGNATURE: _

SIGNATURE REQUIRED