PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P98000084210**1. Corporation Name

CORAL REEF FINANCIAL GROUP, INC.

Friticipal Frace of Busine
1059 SW 14TH ST
BOCA RATON FL 33486

FILED Mar 02, 1999 8:00 am Secretary of State

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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 office or registered agent, and familiar with, and accept the obligations of, Section 607.0503, 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 607.0503, Florida Statutes, board of directors. I hereby accept the appointment as registered agent, and familiar with an appointment as registered agent, and familiar with an appointment as registered agent, and familiar with a paper and appointment as registered agent, and familiar with a paper and appointment as registered agent, and familiar with a paper and appointment as registered agent, and familiar appointment agent appoin					81	Name				}
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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 an attachment with an address, with all other like empowered.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

56-367-1590