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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P98000088071
1. Corporation Name	1 000000001

1. Corporation	MENT # P98000 A CONCEPTS CORP.	088071			99 AFR 30 PN 3	3: 57 ITATE ARIDA
Principal Place	e of Business	Mailing Address			I 1881/1881 (IN 1918) (BIII QUII) QUIII QUIII Q	0101 11108 10111 60111 1888 1881 1801
343 ALMERIA / CORAL GABLES		343 ALMERIA AVENUE CORAL GABLES FL			DO NOT WRITE IN T	HIS SPACE
21 Suite, Apt. 22 City & Stat. 23 Zip 24 AME	Country 25 9. Name and Address of Current RILAWYER ALMERIA AVENUE	28. Mailing Address 26 Suite, Apt #, etc 27 City & State 28 Zip 29 30 Registered Agent	81 Nan	e Sp	3. Date Incorporated or Qualified 10/15/1998 4. FET Number 5. Certificate of Status Desired [] 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the current year Personal Property Tax 10. Name and Address of New Register iegel & Utrera, P. As (P.O. Rox Number is Not Acceptable) 3. Almeria Avenue	[]Yes []No red Agent
11. Pursuant office or n	Bv: / //////	///\ ` /			ral Gables ation submits this statement for the purpose is board of directors. There by an epit the a	85 Zip Code 33134 of changing its registered pointment as registered
	Signature, by NA t. A 1 of 1		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1 1 TITLE	-		[Change [Addition
NAME	Sanchez, Elsfie		1.2 NAME		20000288	
STREET ADDRESS	343 Almeria Aven	ue	13 STREET ADDRES	SS .		01139023
CITY-ST-ZIP TITLE	Coral Gables, FL	33134 []DELETE	14 CITY-S1-ZIF 2 1 TITLE	ł	****150.0]门 ****150.00 []Change []Addition
NAME		10000	22 NAME	Ì		[] Change [] Addition
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NAME			5.2 NAME			
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TITLE		[] DELETE	61 TITLE			[] Change (A) Addition
NAME			6.2 NAME			1/65 ⁷ 4/06J
STREET ADDRESS			63 STREET ADDRES	SS .		53(42)

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 too 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 of the receiver or trusted 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 an attachment with an address, with all other like empowered

SIGNATURE: