04-26-1999 90158 010 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



Katherine Harris DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE

Secretary of State

DOCUMENT # P98000089653

1. Corporation Name

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DUKES PROFESSIONAL OUTREACH, INC.

Principal Place	e of Business		Mailing Address					1		ORBIT OBISE COS	11 1811A 1811E BITEL	
77 NE 186TH TI	ERR.		77 NE 186TH TERR.									
MIAMI FL 33179 MIAMI FL 33179									DO NOT W	RITE IN TH	IS SPACE	
								3 Date	Incorporated or Qualif		0 017102	
									0/1998			
2 Principa Pl	ace of Business		2a. Mailing Address			<u></u>		4. FEIN	ı mber		Ap	r lied For
21 847	-NW/1194 31	1ect	26 77 NE	183	M	- Te	200	6	5-0877	152	No	t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					s Certif	cate of Status Desired		\$8.75	
22 20 3)		27					5, Cerui			Fee Re	equired
City & State	 1		City & State	<u></u> ,				••	on Campaign Financia	ng 🗂	\$5.00	,
23 Mift			28 MIAMI	<u>F1</u>					Fund Contribution		Added t	te Fees
— ^{Zip} ევა ს	Courtry	-1-	Zip	_	untry	bx	ϵ	-	corporation owes the o	urrent year	ntangible	X No
24 33		<u> 200 _</u>	29 331/9	30	<u> </u>	مرح		i	or al Property Tax.	B 1 - 4		12)110
	9. Name and Addres	s of Current F	Registered Agent		-			10. Name	e and Address of Ne	w Registere	a Agent	
DUK	EG KELLY				81	Name	,					
DUKES, KELLA					82	Street	Addres	ss (P.O. Bo	» Number is Not Acce	ptable)		
77 NE 186TH TERR. MIAMI FL 33179												
MIAN	II FL 331/9				83							
					84	City				F	L	Code
office or n	egistered agent /or bcth	in/the State ∈f	and 607.1508, Florida Sta Florida. Such change was s of, Section 607.0505, F	authorize	d by	the corr	d corpor poration	ation subm 's board of	nis this statement for the directors. I hereby ac	cept the apt	· Omement as rej	registered gistered
SIGNATURE	X116-	L () \1	4							4-2	<u> 2-49</u>	
		of registered agent a		- 		it signature	req iired v	vhen reinstating		DATE	AND DIRECTO	VIC IN 12
12.	D 0-	FICERS AND	DELETE	13.			τ	ADDIT	ONS/CHANGES TO	JFFICERS_	Change	Addition
TITLE	DUKES, GEORGE		- Occure		IAME						_ ,	_
NAME	77 NE 186TH TERR.					ADDRESS	,					
STREET ADDRESS	MIAMI FL 33179				TY-S		'					
CITY-ST-ZIP TITLE	D		☐ DELETE	217		1- <u>ZIF</u>	+				☐ Change	Addition
NAME	DUKES, KELLA				IAME							
* STREET ADDRESS	-77-NE-186TH-TERR			1		FADDRESS				<u>-</u> -		
	MIAMI FL 33179				CITY-S		1					
CITY-ST-ZIP TITLE	MINIMI I E OO 11 O		☐ DELETE	3.1 T			+-				☐ Change	Addition
NAME				3.2 N	IAME							
STREET ADDRESS						FADDRESS	3					
CITY-ST-ZIP					CITY-S							
TITLE			☐ DELETE	41T			T				Change	Addition
NAME				4, 21	NAME							

CITY-ST-ZIP 14. I herely certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(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 the my name appears in Block 12 or Block 13 if changer, or any an appear with all other like empowered.

1.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

SIGNATURE: PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-681-9577

Change

___ Change

☐ Addition

☐ Addition