

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 23, 1999 8:00 am
Secretary of State

04-23-1999 90031 025 ***150.00

DOCUMENT # P98000090349

1. Corporation Name

LIQUID CONCEPT, INC.

Principal Place of Business
10774 WILES ROAD
CORAL SPRINGS FL 33076

Mailing Address
10774 WILES ROAD
CORAL SPRINGS FL 33076

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1998

4. FEI Number

65-0875401

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 4747 NOB HILL ROAD
Suite, Apt. #, etc.

22 SUITE # 12

23 SUNRISE, FLA.

24 33351

25 U.S.A.

2a. Mailing Address

26 4747 NOB HILL ROAD
Suite, Apt. #, etc.

27 SUITE # 12

28 SUNRISE, FLA.

29 33351

30 U.S.A.

9. Name and Address of Current Registered Agent

H.A. INCORPORATED
307 NW 101 TERRACE
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name KAPLAN PLAVIN

82 Street Address (P.O. Box Number is Not Acceptable)
7101 W. MCNAB RD.

83 TAMARAC FLA.

84 City

FL

85 Zip Code

33321

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

Signature, typed or printed name of registered agent and title if applicable.

STEPHEN PLAVIN

DATE

APR. 19/99.

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME STUART, KEN
STREET ADDRESS 10774 WILES ROAD
CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE D ☐ DELETE

NAME BRADLEY, ED
STREET ADDRESS 10774 WILES ROAD
CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEN STUART

JAN. 14/99

Date

752-9030

Daytime Phone #

CR2E034 (11/98)

0170684