## 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

P 98000090411 **DOCUMENT #** 

1. Corporation Name

2000 General, Inc.

May 17, 1999 8:00 am Secretary of State

05-17-1999 90043 010 \*\*\*158.75

Pı	rincipal Place of Business 2000 Palm Beach Lakes Blv												
	West Palm Beach FL 33409			DO NOT WRITE IN THIS SPACE									
					į	3.	Date Incorporated or Qualifed 10/22/98						
2.	Principal Place of Business	2a	. Mailing Address				FEI Number		$\Box$	Applied For	_		
1		26					65-0870623		Not Applicable				
_ ,,,	Suite, Apt. #, etc. Suite, Apt. #, etc.					5.	Certificate of Status Desired	×		75 Additional ee Required			
City & State			City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 Ma Added to F					_		
,   ja.,	Zip Country	Zip Co		puntry			This corporation owes the current Personal Property Tax.	-	gible Yes				
'	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						_		
Wilton L. White, Esquire 625 North Flagler Drive, 9th floor West Palm Beach FL 33401					Name				_				
					Street Addres	et Address (P.O. Box Number is Not Acceptable)							
											_		
					City				85	Zip Code			

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. (NOTE: Registered Agent signature required when reinstating)  DATE											
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	4							
TITLE	D,P 3	1.1 TITLE	Change Additio	ın							
NAME	Michael P. McCloskey	1.2 NAME									
STREET ADDRESS	2000 Palm Beach Lakes Blvd. Ste. 301 West Palm Beach FL 33409	1.3 STREET ADDRESS	•	1							
CITY-ST-ZIP		1.4 CITY-ST-ZIP		_							
TITLE	D,S DELETE	2.1 TITLE	☐ Change ☐ Addition	ın [							
NAME	Jonathan Cameron-Hayes	2.2 NAME									
STREET ADDRESS	2000 Palm Beach Lakes Blvd, Ste 301	2.3 STREET ADDRESS	·	ļ							
CITY-ST-ZIP	West Palm Beach FL 33409	2. 4 CITY-ST-ZIP		_							
TITLE	D DELETE	3.1 TITLE	Change Addition	ın							
NAME	Richard Perry	3.2 NAME									
STREET ADDRESS	179 East 71st Street, Apt. 3	3.3 STREET ADDRESS									
CITY-ST-ZIP	New York NY 10021	3.4. CITY-ST-ZIP									
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Additio	חנ							
NAME		4. 2 NAME									
STREET ADDRESS		4.3 STREET ADDRESS									
CITY-ST-ZIP		44 CITY-ST-ZIP		_							
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition	n							
NAME		5.2 NAME									
STREET ADDRESS		5.3 STREET ADDRESS		1							
CITY-ST-ZIP		5.4 CITY-ST-ZIP		╛							
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition	n							
NAME		6.2 NAME									
STREET ADDRESS		6.3 STREET ADDRESS									
CITY-ST-ZIP		6.4 CITY-ST-ZIP									

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 ttachment with an address, with all other like empowered.

SIGNATURE:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-615-3903 Daytime Phone #

CR2E034 (11/98)