PROFIT CORPORATION: ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Apr 14, 1999 8:00 am Secretary of State

| , , , , , | 1999 | 13 | | DIVISION OF | FCORPOR | VATIONS |] | | | 004 010 ** | |
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| Principal Place | | | _ | Address | | | ĺ | | , | | |
| 15040 WINDOVER WAY 15040 WINDOVER WAY DAVIE FL 33331 DAVIE FL 33331 | | | | | | | 1 | | • | | |
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| | | | | | | | 3. Date In 10/27 | corporated or C | palifed | | |
| D. Dringing D | Place of Business | | 2a, Ma | iling Address | | | 4. FEI Nui | | | A | ppiled For |
| 2. Principal P | rigical or principless | | 28 | ming 7 to Grood | | | 1 " _ | 08756 | ,5 2 | | lot Applicable |
| Suite, Apt. | . #, etc. | | | ile, Apt. #, etc. | | | | te of Status De | | | Additional |
| 2 | · | <u> </u> | 27 | | | | | | | | Required |
| City & Stat | te | | | y & State | | | | Campaign Fin and Contribution | | | May B∋ to Fees |
| Zip | | Country | 28 Zip | | Cou | intry | | | the current year | | 10 / 000 |
| 4 | 25 | , , , | 29 | | 30 | • | Person | il Property Tax. | · | []Yes | □No |
| | | Address of Cu | rrent Registere | d Agent | | 24 | 10. Name | rid Address o | f New Registers | d Agent | |
| CDA | AVEC CHERVI | | | | | 81 Name | • | | | | |
| GRAVES, CHERYL . 15040 WINDOVER WAY | | | | 82 Street Addr | | | Adcress (P.O. Box | Number is Not | Acceptable) | • | |
| | NE FL 33331 | | | | | 83 | | | | | |
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| | | | | • | | 84 City | | | F | | Code |
| 11, Pursuant | to the provisionar | Sections 507. | 0502 and 607.1 | 508, Florida Stat | tutes, the a | | corporation submit | this statement | for the purpose | | |
| 11. Pursuant office or r agent. I a | t to the provisionar registered agent, o am familiar with, ar | Sections 507. | .0502 and 607.1 tate of Florida. Solipations of, Sec | 508, Florida Stat such change was ction 607,0505, F | tutes, the a authorized | | corporation submit ration's board of d | i his statement rectors. I hereb | for the purpose by accept the app | | |
| 11. Pursuant office or r agent. I a | i to the provisionar registered agent, o am familiar with, ar | | | | 1 ^ | bove-named by the corporates. | | this statement rectors, I hereb | | | |
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| SIGNATURE | ソト | od name of registered | d agent and title if appl S AND DIRECTO | cable. (NO | 1 ^ | pove-named of by the corporutes. Agent agreeurs in | iquied when refreshing) | | | of changing it pointment as r | s registered egistered |
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empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address, with all other like empowered.