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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000091287

JOANNE T. LEWIS, P.A.

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90068 004 ***150.00



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Principal Plac	e of Business	Mailir	ng Address				-		II) BUITO IDIUI (1810 II)	01 (1815) (1865 (1866)	
915 MIDDLE RIVER DRIVE STE 302 915 MIDDLE RIVER DRIVE ST FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33304			TE 302								
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					•		3. Date incorporate 10/26/1998	o or Qualifed.			İ
2. Principal P	Place of Business	2a. M	lailing Address				4 FEI Number	•		pplied For	1
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Suite, Apt.	#, etc.		uite, Apt. #, etc.				- 0-454			Additional	7
22		27					5. Certifcate of Stat	us Desired	Fee F	Required	
City & Stat	te .		tity & State				6. Election Campaig	n Financing	\$5.00	May Be	
23	<u> </u>	28					Trust Fund Contr	ibution		to Fees	4
Zip —	Country	Zi	·		untry		8. This corporation	-		□•1- '	
24	25	29	3	0	1		Personal Propert 10. Name and Addr		Yes Yes	□No	
	9. Name and Address of Current	Register	eo Agent		81 1	Name	10, Name and Addi	ess of New Keyls	stered Agent		_
TULL	LOCH, ANDREA M		ŕ		Щ						_
3/3/915	MIDDLE RIVER DRIVE STE 302				82	Street Addres	ess (P.O. Box Number i	s Not Acceptable)			
FT L	AUDERDALE FL 33304				83				1 340 1 3 P GA 5		_
							197494	国际特别的	the Military	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	
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11. Pursuant	to the provisions of Sections 607.0502	2 and 607.	1508, Florida Statutes	, the a	bove-n	named corpor	ration submits this state	ement for the purp	ose of changing it	s registered	_
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	of Florida. ions of Se	Such change was auti ection 607.0505, Florid	horize: la Stat	d by the tutes.	e corporation	n's board of directors. I	hereby accept the	appointment as r	egistered	
ū								1			
SIGNATURE						•	-	man and a man an			
SIGNATURE	Signature, typed or printed name of registered agent a		·		d Agent sig	ignature required v			ATE		
12.	OFFICERS AND		ORS	13.		ignature required v	when reinstating) ADDITIONS/CHAN		RS AND DIRECT		
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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:

954-568-2777