## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # POROCOOTEST

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90058 005 \*\*\*150.00

Corporation	n Name	1031331								
PARK CO	OURT HOLDINGS, INC.					l				
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Principal Place	e of Business	Mailing Address					I IOURIUD) IIU TOIOE IDIII DOIEI	APRIL BARRI GARRA	18111 18881 BIIBI B	1111 L <b>BB</b> L L <b>BB</b> 1
1633 JEFFERSON AVE. P. O. BOX 190651										
MIAMI BCH FL 33119 MIAMI BCH FL 33119										
						ļ		RITE IN THIS	SPACE	
							3. Date Incorporated or Qualifo	ed		-
		- <u> </u>					11/16/1998		<del></del>	
2. Principal Pl	lace of Business	2a. Mailing Address					4. FEI Number			lied For
21	<del> </del>	26					65 088 482	<u>.                                    </u>	\$8.75 Ad	Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired		Fee Req	
22		27				<del></del> -	a Clastica Campaign Financia			
City & Stat	e	— ·					<ol><li>Election Campaign Financin Trust Fund Contribution</li></ol>	9 🗆	\$5.00 N Added to	
Zip	Country	Zip	Col	untry				urrent vear Int		
——————————————————————————————————————	25 29 30						8. This corporation owes the current year Intangible Personal Property Tax.  Yes No			
24	9. Name and Address of Curre		1901	T			10. Name and Address of Nev	v Registered	Agent	
-	3. Name and Place of Carro			81	Name					
KAR	LOCK, MADISON K			-			(D.O. B Maria Nat Assa	-t-blo\		
1633	3 JEFFERSON AVE.			82	Street	4aar <del>e</del> s	s (P.O. Box Number is Not Acce	plable)		
MIAN	WI BCH FL 33119			83						
									85 Zip C	n d n
				84	City			FL	85 Zip Ci	Jue
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	tutes, the a	above	e-named o	corpor	ation submits this statement for t	ha purposa of	changing its s	egistered
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the obligation.	of Florida. Such change wa	s authorize Florida Stat	d by	the corpo	oration'	s board of directors. I hereby ac	cept the appoi	ntment as reg	stered
	and decept the cong.							- 10 -9°		į
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (N	OTE: Registere	d Agen	t signature re	equired w	hen reinstating)			
12.	OFFICERS A	TO DIRECTORO	13:	•			7,001110110701771102010	OFFICERS AN		
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-99 305 5320260