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 29, 1999 8:00 am Secretary of State

04-29-1999 90274 013 ***150.00

1. Corporation	MENT # P98000 ESTMENT HOLDINGS, INC			·		
Principal Place	of Business	Mailing Address			T I SADITABLI IN TATAS TATIS DRIVE DRIVE DRIVE DRIVE DRIVE DRIVE ORIGIN BRITT FOR A CHRIST LADIT A	••
10693 WILES R		10693 WILES ROAD				
SUITE 228	, .	SUITE 228				
CORAL SPRING	S FL 33076	CORAL SPRINGS FL 33076			DO NOT WRITE IN THIS SPACE	$\overline{}$
					3. Date Incorporated or Qualifed	
		2a. Mailing Address			11/18/1998 4. FEI Number Applied For	_
2. Principal Place of Business					65-0875655 Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additiona	
¬		27			5. Certificate of Status Desired Fee Required	
22 City & State		City & State			6. Election Campaign Financing 55.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip Country		Zip Country			8. This corporation owes the current year Intangible	
24	25	29	30		Personal Property Tax. ☐ Yes ☐ No	
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent	_
SPEAR, GARRY R 5455 N FEDERAL HWY SUITE I			1	Name Street Ac	t Address (P.O. Box Number is Not Acceptable)	
BOC	A RATON FL 33487		-	84 City	FL 85 Zip Code	
office or re agent. I a	to the provisions of Sections of Sections do segistered agent, or both, in the State familiar with, and accept the oblination of the section	te of Florida. Such change was all gations of, Section 607.0505, Flor	ithorized ida Statui	by the corpor les.	orporation submits this statement for the purpose of changing its registers ation's board of directors. I hereby accept the appointment as registered purpose the appointment as registered when reinstating) OATE	
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE		☐ DELETÉ	1,1 TITL		P Change CAAdd	dition
NAME			1.2 NAN	Œ ļ.	Jodi Catterson, Lanc	ļ
STREET ADDRESS			1.3 STR		10693 Wiles Road #228	
CITY-ST-ZIP	•		1.4 CIT	(-ST-ZIP	Ceral Springs 7L 33076	
TITLE '	W 10	☐ DELETE	2.1 TITLE		☐ Change ☐ Ad	dition
NAME			2.2 NAA	4E		i
STREET ADDRESS			2.3 STR	EET ADDRESS		1
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP	<u> </u>	
TITLE		☐ DELETÉ	3.1 TITLE		☐ Change ☐ Ad	dition
NAME ,			3.2 NAM	1E		1
STREET ADDRESS	•		3.3 STF	EET ADDRESS		
CITY-ST-ZIP	· <u></u>		3.4. CIT	Y-ST-ZIP		
TITLE		☐ DELETÉ	4.1 TITL	E	☐ Change ☐ Ad	ldition
NAME	,		4. 2 NA	ME		
STREET ADDRESS			4.3 STF	EET ADORESS		
CITY-ST-ZIP	2		4.4 CIT	r-ST-ZIP		
TITLE		DELETE	5.1 TITE	I .	☐ Change ☐ Ad	dition
NAME	•		5.2 NAI			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		dition
TITLE	!	☐ DELETE	6.1 TITL		Change Ad	IGIUON
NAME	reduce a loss.		6.2 NAM			
STREET ADDRESS	The Control of Many Many		6.3 STF	REET ADDRESS		

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 eddress, with all other like empowered.

SIGNATURE: