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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

1999

DOCUMENT # P98000105107 1. Corporation Name

MARIO PAUZE INC.

**FILED** Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90019 029 \*\*\*150.00



Principal Place of Business			Mailing Address				1 781	011981 lia iaiai iaini aai		11007 900		****		
518 N. 57TH TERRACE IOLLYWOOD FL 33021			1518 N. 57TH TERRACE HOLLYWOOD FL 33021			,		DO NOT	WRITE IN	THIS !	SPACE			
						ı	3. Date in	corporated or Qua	lifed					
							12/18/	11998						
2. Principal Place of Business			2a. Mailing Address				4. FEI Number					Appl	ied For	
21			26				65	- 088 -	3211			Not a	Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5 Contifer	O-sife-to of Station Desired				\$8.75 Additional		
22		27					5. Certificate of Status Desired			Fee Required				
City & State			City & State				6. Election	n Campaign Finan	Campaign Financing			\$5.00 May Be		
23		28					Trust Fund Contribution Adde					ded to	Fees	
Zip	Country		Zip	Country	,		8. This co	rporation owes the	current ye	ar Inta	ngible			
24	25	29	30				Person	al Property Tax.			☐ Yes	7	No	
Name and Address of Current Registered Agent							10. Name	and Address of N	ew Regist	ered A	gent			
				81	Name	ı		t o						
PAUZE, MARIO				82	Street Address (P.O. Box Number is Not Acceptable)									
1518 N. 57TH TERRACE			"		7100700	0 (i .0. Don		,						
HOLLYWOOD FL 33021			83											
				04	C:h						85	Zip Co	de	
				84	City					FL	65	zip Qu		
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida	a, Such change was autho Section 607,0505, Florida	rized by Statutes	the corp	ooration's	s board of d	s this statement fo lirectors. I hereby a	eccept the	appoint	hangin Iment a	g its re is regis	egistered stered	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered						required w				TE				
12. OFFICERS AND DIRECTORS 13.						1	ADDITIO	ONS/CHANGES TO	OFFICE	RS AND			S IN 12 Addition	
TITLE				1.1 TITLE	1.1 TITLE						☐ Cha	nge	☐ Addition	
NAME	PAUZE, MARIO			1.2 NAME										
STREET ADDRESS 1518 N. 57TH TERRACE 1.31				1.3 STREE	3 STREET ADDRESS									
CITY-ST-ZIP	HOLLYWOOD FL 33021			1.4 CITY+S	T-ZIP								<del></del>	
TITLE	D		☐ DELETE	2.1 TITLE		1					☐ Cha	nge	☐ Addition	
NAME	GOURDE, ANNIE			2.2 NAME		1								
	4540 N STUTEDDACE			2 2 CTDEE	*******	.]								

Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 4.1 T/TLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

2. 4 CITY-ST-ZIP

CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

HOLLYWOOD FL 33021

(866) 3(396-1109)