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

DOCUMENT # P98000105421

ERNEST A. VARVOUTIS III, C.P.A., P.A.

FILED Apr 14, 1999 8:00 am Secretary of State 04-14-1999 90221 030 ***150.00

										: 48 48 44	
Principal Place of Business		Mailing Add	iress				1 18811881 118 18181 18111 88111 88111		., #:11) #18)#	11991 (191 1991	
2555 NORTHEAST 11TH STREET. SUITE 610 2555 NORTHEAST 11TH STREET FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304					TE 6	10	DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed				
							12/21/1998				
2. Principal Place of Busines	2a. Mailing Address					4. FEI Number		A	opplied For		
21	26					65-0882151	<u></u>		lot Applicable	-	
Suite, Apt. #, etc.	Suite, Apt. #, etc.					5. Certifcate of Status Desired	<u> </u>		Additional Required	 	
= City & State	City & State				_	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees					
Zip Country		Zip Cour			ntry	8. This corporation owes the current year Intai					
24 25	25		29 30				Personal Property Tax.				4
	d Address of Current	Registered Ag	ent				10. Name and Address of New F	Registered A	igent		┨
VAN IOUTIA FONE	AT 4 III				81	Name					
VARVOUTIS, ERNEST A III 2555 NORTHEAST 11TH STREET, SUITE 610					82	Street Add	ress (P.O. Box Number is Not Accepta	ible)			
FORT LAUDERDAL	E FL 33304				83	- 1.					
					84	City		FL	85 Zip	Code	
			51 11 Ot 1				tion and with this statement for the		thanging if	te registered	-
 Pursuant to the provision office or registered agent agent. I am familiar with, 	or both in the State o	if Florida Such	change was a	uthonzed	ועסנ	the corporati	poration submits this statement for the on's board of directors. I hereby accept	ot the appoin	tment as r	egistered	
SIGNATURE	orinted name of registered agent	7//	JA.	· Degletered	Agent	cionature require	od when reinstating)	S/SC DATE	<u>, </u>		1 -
12.	OFFICERS AND		(4012	13.		- alghorous radams	ADDITIONS/CHANGES TO OF	FICERS AN	DIRECT	ORS IN 12	8
TITLE PVD			DELETE	1.1 TI	n.e				Change		3
'	ERNEST A III			1.2 N	ME						3
STREET ADDRESS 2555 NORTH	SUITE 610 1.3 51			REET	ADDRESS					}	
	RDALE FL 33304	,		1.4 C	TY-ST	-ZIP					3
TITLE			DELETE	2.1 Π	_				Change	Addition	١ (
NAME				2.2 N	ME						ļ
STREET ADORESS				2.3 \$	REET	ADDRESS					1
CITY-ST-ZIP				2.40	ITY-S	r-zip]_
TITLE			□.DELETE -	31.1	TLE				Change	e Addition	
NAME				3.2 N	AME						
STREET ADDRESS				3.3 S	REET	ADDRESS					
CITY-ST-ZIP				3.4. C	ITY-S	r-zip					1
TITLE			☐ DELETE	4.1 🟗	TLE				Change	e	\ .
NAME				4.2 N	AME						
STREET ADDRESS				4.3 S	REET	ADDRESS					
CITY-ST-ZIP				4.4 C	TY-\$1	ZIP]
TITLE			☐ DELETE	5.1 ΤΙ	TLE	_			Change	Addition	
NAME				5.2 N	AME						
STREET ADDRESS				5.3 \$	REET	ADDRESS					
CITY-ST-ZIP					TY-\$1	r-ZIP					1
TITLE			☐ DELETE	6.1 31					Change	e	1
NAME				6.2 N	AME						
STREET ADDRESS				6.3 S	REET	ADDRESS					1
				640	TY. 91	7. 7ID					1

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 suppliemental 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

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/99

954 566-362