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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P98000106363

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90179 025 ***158.75

100121	MOUTH, INC.					181 1811 1811 1	
Principal Place	e of Business	Mailing Address				(1831 88 11 0 83188 811	10 Tilbe ill 1001
937 S.W. 27TH	AVE., STE, 303	2937 S.W. 27TH AVE., STE.	303				
OCONUT GROVE FL 33133 COCONUT GROVE FL 33133					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	11110 01 702	
					12/23/1998		
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	$$ \top \top	Applied For
24)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	26			65-0900586		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	•	5 Additional
22		27			5. Certificate of Status Desired	Fee	Required
City & Stat	e	City & State			6. Election Campaign Financing	•)0 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes the current ye		□No Ì
24			30		Personal Property Tax. 10. Name and Address of New Regist	Yes	
	9. Name and Address of Current	Registered Agent	+	B1 Name	to. Name and Address of New Regist	eled Agent	
GREE	EN, PATRICIA K						
2200 MUSEUM TOWER			[Street Ad	dress (P.O. Box Number is Not Acceptable)		1
	V. FLAGLER ST.		}	B3			
MIAM	I FL 33130						
			- {	B4 City		FL 85 2	(ip Code
SIGNATURE	m familiar with, and accept the obligation						
	Signature, typed or printed name of registered agent.			gent signature requ		TE AND DIDE	TODO IN 12
12.	OFFICERS AND	DIRECTORS	13.		DA ADDITIONS/CHANGES TO OFFICER	RS AND DIREC	
12. TITLE	OFFICERS AND		13.	E			
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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:

4-2-99

305) 476-818

CR2E034 (11/98)