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

Principal Place of Business Mailing Address		·10·11 W: M1 W1	1611 1611 1611
6365 N.W. 6TH WAY 6365 N.W. 6TH WAY			
SUITE 160 SUITE 160			
FI. ENDERDALL 1E 33003	ITE IN THIS SPA	ACE	
3. Date Incorporated or Qualifed 10/29/1990	······································	-	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number		<u> </u>	olied For
21 26 65-0225199			Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc5; Certifcate of Status Desired	⊡\$		dditional
27		Fee Red	<u>`</u>
City & State City & State 6. Election Campaign Financing		\$5.00	
23 Trust Fund Contribution Zip Country Zip Country 8 This corporation owes the curr		Added to	rees
		lole Yes '	X No
24 25 29 30 Personal Property Tax. 9 Name and Address of Current Registered Agent 10. Name and Address of New F			<u>paino</u>
9. Name and Address of Current Registered Agent 10. Name and Address of New F	negistered riger		
RENZULLI, EDWARD M			
6365 N.W. 6TH WAY 82 Street Address (P.O. Box Number is Not Accepta	able)		
OUTT 400			
AUTHE TOU (93)			Į.
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FT. LAUDERDALE FL 33309	E1 8:	5 Zip C	ode
FT. LAUDERDALE FL 33309 84 City All Disputable the application of Sections 607 0503 and 607 1508. Election Statutes the above named comporation submits this statement for the	PL purpose of char	nging its	registered
FT. LAUDERDALE FL 33309 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	purpose of char pt the appointme	nging its	registered
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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 supplied and accurate and there my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of 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, if on an attachment with an address, with all there incovered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

4-12-99

FILED Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90270 034 ***150.00