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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S11104

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90049 038 ***150.00

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Principal Place			-									
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							3. Date Inco 11/06/1	rporated or Qualife 990	d			
2. Principal Pl	lace of Business	2a.	Mailing Address				4. FEI Numb					ied For
21		26					65-040	1074				Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certifcate	of Status Desired		+	΄ ⊃ Ad ∍Requ	ditional
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24	9 Name and Address of Curr			JU				d Address of Nev	v Registered	Agent		
	<u></u>				81 Name			_				
	PHEN, JOSEPH C.				92 Street	Addra	es (P.O. Boy N	umber is Not Acce	ntable)			
9601 WEST CALUSA CLUB DR			82 Street Addr			Add 6	33 (i .O. DOX 14	LINES, 13 1101 71000	, pasio,			
MIAN	/II FL 33186				83							
					84 City				FI	85	Zip Co	ode
44 Pursuant	to the provisions of Sections 607.0	0502 and 6	07.1508, Florida Statute	s, the al	ove-named	corpoi	ration submits t	his statement for t	no purnoco o	f changin	g its re	egistered
office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli	ate of Florid ligations of	da. Such change was au , Section 607.0505, Flori	thorized da Stati	by the corpo ites.	oration	n's board of dire	ectors. I hereby acc	cept the appo	aintment a	ıs regi:	stered
SIGNATURE	Oi				Agent signature n				DATE			
	Signature, typed or printed name of registered OFFICERS		if applicable. (NOTE:	Registered	Agent signature re		when reinstating)	S/CHANGES TO	DATE		CTOR	 RS IN 12
12.	OFFICERS		if applicable. (NOTE:				when reinstating)	S/CHANGES TO	DATE			RS IN 12
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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 changes or on a relatachment with an address, with all other like empowered.

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

03/30/99

(305) 255-9600

Date

Daytime Phone #