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

FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90070 049 ***150.00

Principal Place of Business Mailing Address 8490 CYPRESS GLEN CT. LAKE WORTH FL 33467 2. Principal Place of Business 2. A Mailing Address 2. Principal Place of Business 2. A Mailing Address 2. Principal Place of Business 2. A Mailing Address 3. Date Incorporated or Qualified 01/23/1991 2. Principal Place of Business 2. A FEI Number 6. F1023/1991 2. Principal Place of Business 2. A FEI Number 6. Sulte, Apt. #, etc. 2. Sulte, Apt. #, etc. 2. City & State Cit
B490 CYPRESS GLEN CT. LAKE WORTH FL 33467 2. Principal Place of Business 2. A. Mailing Address 2. Principal Place of Business 2. A. Mailing Address 3. Date Incorporated or Qualifed 01/23/1991 2. Principal Place of Business 2. A. FEI Number 65-0236873 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Principal Place of Status Desired 5. Certificate of Status Desired Fee Required Fee Required 2. Principal Place of Business 2. Election Campaign Financing Fee Required Fee Required 7. Tust Fund Contribution Address of Status Desired Fee Required 8. Flection Campaign Financing Fee Required 7. Tust Fund Contribution Address of New Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 8. Name GUDWIN, BURTON W 220 NE 199 ST F106 SUITE 303 MIAMI FL 33179 8. City Street Address (F.O. Box Number is Not Acceptable) 8. Street Address (F.O. Box Number is Not Acceptable) 8. Street Address (F.O. Box Number is Not Acceptable) 8. Suite 33 Address 8. City LIAKE WORTH FL 8. Zip Code 3. 3467 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pinted name of registered agent ag
LAKE WORTH FL 33467 LAKE WORTH FL 33467 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/23/1991 2. Principal Place of Business 2. Amilling Address 2. Principal Place of Business 2. A Fell Number 65-0236873 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 2. Country 2. December 2. Suite, Apt. #, etc. 3. Certificate of Status Desired 4. Fell Number 65-0236873 Selection Campaign Financing Added to Fees 7. This corporation owes the current year Intanglele 7. Personal Property Tax. 7. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GUDWIN, BURTON W 220 NE 199 ST F106 SUITE 303 MIAMI FL 33179 82 Street Address (P.O. Box Number is Not Acceptable) 84 City LAKE WORTH FL 85 Zip Code 3. 33467 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, ipped or printed name of registered agent and 1564 if appointment as registered 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 the appointment as registered 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 the appointment as registered 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 the appointment as registered 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 the appointment as registered office or registered agent or printed name of registered agent and title if appointment as registered agent an
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Suite, Apt. #, etc. Suite, Apt. #, etc.
27 S. Certificate of Status Desired Fee Required
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9. Name and Address of Current Registered Agent GUDWIN, BURTON W 220 NE 199 ST F106 SUITE 303 MIAMI FL 33179 82 Street Address (P.O. Box Number is Not Acceptable) 84 90 CYPRESS GLEN COURT 83 NAME 84 City LAKE WORTH 10. Name and Address of New Registered Agent 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City LAKE WORTH FL 85 Zip Code 1.1 AKE WORTH 1.1 ARE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.2 OFFICERS AND DIRECTORS 1.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.4 TITLE 1.5 OFFICERS AND DIRECTORS 1.5 NAME 1.5 NAME 1.5 NAME 1.5 NAME 1.5 NAME 1.6 NAME 1.6 NAME 1.6 NAME 1.7 NAME 1.7 NAME 1.8 NAME 1.8 NAME 1.8 NAME 1.8 NAME 1.8 NAME 1.8 NAME 1.9 NAME 1.9 NAME 1.9 NAME 1.9 NAME 1.9 NAME 1.9 NAME 1.0 NAME NAME 1.0 NAME NAME NAME NAME NAME NAME NAME NAME
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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 an attachment with an address, with all other like empowered.

SIGNATURE:

advice RED SIGNING OFFICER OR DIRECTOR