Apr 15, 1999 8:00 am Secretary of State

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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 # **S34213**

1. Corporation Name

THE CANARY GROUP, INC.

			•	•		
Principal Place		Mailing Address				11
2295 CORPORATE BLVD NW		2295 CORPORATE BLVD., NW				
215 215			****			
BOCA RATON FL 33431 BOCA RATON FL 33431		BOCA RATON FL 33431			DO NOT WRITE IN THIS SPACE	
US US				3. Date Incorporated or Qualifed	İ	
	·				02/22/1991	_
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	_
21		26			65-0247331 Not Applicab	ie
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Security Securi	
22		27			Fee Required	
City & State	e .	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	\dashv
Zip	Country	Zip	Country	'	8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No	
24	25		30	·	Total tropolly total	
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registered Agent	\dashv
DAM	ATO LAUDA		01	Name		
	ATO, LAURA CORPORATE BLVD NW		82	Street	t Address (P.O. Box Number is Not Acceptable)	
	CORPORATE DEVD INV		ļ			
215	A DATON EL 00404		83			
BUC	A RATON FL 33431		84	City	85 Zip Code	\neg
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. 11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the above	e-named	d conporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	1==
agent. I ar	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	da Statutes	ine corpe	politically stand of allocation vitology accompanies approximation	- 1
_					·	
SIGNATURE					· · · · · · · · · · · · · · · · · · ·	١
SIGNATURE	Signature, typed or printed name of registered ag		_	nt signature n	required when reinstating) DATE	_
SIGNATURE 12.	OFFICERS A	ND DIRECTORS	13.	nt signature n	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ion
<u> </u>	OFFICERS A		13. 1.1 TITLE	nt signature n		ion
12.	OFFICERS A PT LAURA B. DAMATO	ND DIRECTORS	13.	nt signature n	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ion
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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.

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP