## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

-1999-

**DOCUMENT # \$50554** 



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90051 046 \*\*\*150.00

FORESIG	GHT LAND SURVEYING, INC	<b>.</b>				
Delegies I Diege	of Purioses	Mailing Address			{	
Principal Place of Business Mailing Address 412 S.W. 16TH STREET FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 33315					DO NOT MIDITE IN T	,
1					DO NOT WRITE IN TI	HIS SPACE
	•				3. Date Incorporated or Qualifed 05/06/1991	
C. Dain air at Di	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	· Applied For
<del></del>	7				65-0264477	Not Applicable
Suite: Ant.	ite; Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional
22					5. Certifcate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23					Trust Fund Contribution	Added to Fees
Zip	Country Zip			!	8. This corporation owes the current year	
24	25		30		Personal Property Tax.	Yes No
<del></del> :	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Register	ed Agent
WEA	VER, DARREL BRUCE					
412 SW 16TH STREET			82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
	T LAUDERDALE FL 33315		83	<del>-</del>	Political Control of the Control of	
	· Bioblibile i E cook					
į.	• •		84	City		EL 85 Zip Code
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida, Such change was autions of, Section 607.0505, Florida	da Statutes	me corporauc	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	politiment as registered
12.		D DIRECTORS	13.	-	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE !	PTD	☐ DELETE	1,1 TITLE			☐ Change ☐ Addition
NAME :	WEAVER, DARREL BRUCE		1.2 NAME			
STREET ADDRESS	412 SW 16TH ST.		1.3 STREET			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP			
TITLE	VSD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME ,	WEAVER, TERRI		2.2 NAME			
STREET ADDRESS	412 SW 16TH ST.		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4 CITY-ST-ZIP			Change Addition
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS				TADDRESS		
C(TY-ST-ZIP.		☐ DELETE	3.4. CITY- ST-ZIP 4.1 TITLE			☐ Change ☐ Addition
TITLE		_ Deterie	4. 2 NAME			
NAME !			4.3 STREET ADDRESS			
STREET ADDRESS			4.4 CITY-ST-ZIP			ì
CITY-ST-ZIP.		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME	,	_	5.2 NAME			
STREET ADDRESS		5		TADDRESS		
CITY-5T-ZIP			5.4 CITY- S	ST-ZIP		
TITLE	☐ DELETE 6.		6.1 TITLE			☐ Change ☐ Addition
NAME		•	6.2 NAME			,
STREET ADDRESS	·		6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-5	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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/99 (954)

954)462-0925

CR2E034 (11/98)