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

1, Corporat	tion Name # 5/5450				
11TH 5	STREET INVESTMENT, INC.				
				# 1667/0/8 (#1 1860) 0/10) 0/10) Altit salt o	1 831 B(B) (B)B() B)B() B(B)(B)B() (B)B()
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Principal Pla	ace of Business	Mailing Address		- I requirate un readoi dinui dilber ensil 90il e	.BEC DIGIT BIBIT BIBIT DIGIT DIBIT INDE
3400 SW 111		3400 SW 11TH ST.		•	
DEERFIELD 8	BEACH FL 33442	DEERFIELD BEACH FL 334	142		
	•			DO NOT WRITE IN T 3. Date Incorporated or Qualified	HIS SPACE
		* 1	·	08/22/1991	•
2. Principal	Place of Business .	2a. Mailing Address		4. FEI Number	Applied For
21	* ·	26		65-0292724	Not Applicable
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.	7	5. Certifcate of Status Desired	\$8.75 Additional
22 City 8 Ct				5. Certificate of Status Desired	Fee Required
23	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation owes the current year Personal Property Tax.	Intangible ☐ Yes ☐ No
	9. Name and Address of Current			10. Name and Address of New Register	
TE	MARILLACED CADY		81 Name		
TERWILLIGER, GARY. 3400 SW-11TH ST			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
DEERFIELD BEACH FL 33442				The state of the s	
DELIGICED DESCRIPTE SOTTE			83		人们在阿斯州 斯
		•	84 City		85 Zip Code
11. Pursuan	nt to the provisions of Sections 607.0502	and 607,1508. Florida Statute	es, the above-named corn	poration submits this statement for the purpose	of changing its registered
agent. I	registered agent, or both, in the State of am familiar with, and accept the obligati	f Florida. Such change was a	uthorized by the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE			nda Otototes.		,
	Signature, typed or printed name of registered agent		Registered Agent signature require	d when reinstating)	
12.	OFFICERS AND	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	
NAME	PTD TERWILLIGER, GARY	L) DELETE	1.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			1.2 NAME		
CITY-ST-ZIP	DEERFIELD BEACH FL		1.3 STREET ADDRESS		
TITLE	VP	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	TERWILLIGER, MARC		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2. 4 CITY+ST-ZIP	·	
TITLE	র পরে ১ এ সমূর । ১০০ রহন।	☐ DELETE	3.1 TITLE		Change Addition
NAME 3/6			3.2 NAME		•
STREET ADDRESS	initial teach in the second		3.3 STREET ADDRESS	[15] F. S.	17、1955年1月,海北京城市
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		
		, Detele	4.1 TITLE 4. 2 NAME	The state of the s	Change Addition
NAME STREET ADDRESS	in the second se		4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS	75.95 1 N		5.3 STREET ADDRESS		
CITY-ST-ZIP	Pfu		5.4 CITY-ST-ZIP		<u> </u>
TITLE	्राच्यामध्यात्राच्याः विक्रीति द्वारा (त्रीन्त्र हो)	☐ DELETE	6.1 TITLE		Change Addition
NAME	1 m.		6.2 NAME		

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP : *

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90057 045 ***150.00