May 04, 1999 8:00 am Secretary of State

05-04-1999 90203 015 ***150.00

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 # \$82456

1. Corporation Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SINGER ENTERPRISES, INC.

Principal Place	e of Business	Mailing Address		,,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-	£ ifittiffiet id i etiet citte genes mein mitt aine	i didit didit dibit :	Alfit Aleu lant	
2207 WILSON STREET 2207 WILSON STREET								
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020								
					DO NOT WRITE IN TH	S SPACE		
					3. Date Incorporated or Qualifed			
					09/23/1991			
Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	ļ	plied For	
21		26			65-0288796		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	y	Additional equired	
City & State	8	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country Zip 25 29 30			8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑ No				
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent		
			81	Name				
SINGER, BRUCE				Street Address (P.O. Box Number is Not Acceptable)				
2207 WILSON STREET								
HOLLYWOOD FL 33020			83					
			84			. 85 Zip	Codo	
				City	FL 85 Zip Code			
i office or o	egistered agent, or both, in the State m familiar with, and accept the obligations. Signature, typed or printed name of registered age	of Florida. Such change was auth itions of, Section 607.0505, Florida	orized by a Statutes	tne corporatio	oration submits this statement for the purpose in's board of directors. I hereby accept the appropriate of the purpose in the	ointment as re	egistered	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12	
TITLE	PSD	☐ DELETE	1.1 TITLE			Change	Addition)	
NAME	SINGER, BRUCE		1.2 NAME				\$	
STREET ADDRESS	2207 WILSON STREET	i	1.3 STREET	ADDRESS			1	
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition	
NAME			2.2 NAME				ĺ	
STREET ADDRESS			2.3 STREE	ADDRESS				
CITY-ST-ZIP		:	2.4 CITY-5	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME				i	
STREET ADDRESS			3.3 STREET	FADDRESS				
CITY-ST-ZIP			3.4. CITY-5	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME			4. 2 NAME				-	
STREET ADDRESS			4.3 STREE	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
1	1		5.2 NAME	ŀ				

CITY-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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

☐ DELETE

CR2E034 (11/98)

☐ Change ☐ Addition