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PROFIT CORPORATION : ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # COOCE

Principal Place of Business	Mailing Address	
P.O. BOX 830306	P.O. BOX 830306	
MIAMI FL 33283	MIAMI FL.33283	

## **FILED** Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90006 046 \*\*\*150.00

T. Corporation	ECH, INC.				( (88) (8) 8 (8) (8) 8 (10) 8 (10) 8	:11 <b>5 A</b> ns <b>A</b> 18s <b>P18</b> t <b>A</b> 1 <b>A</b> 1 <b>A</b> 18t1	. Aldii Aleli issi	
Principal Plac	ce of Business	Mailing Address		· · · · · ·		III O BILL OIGH OISH EIGH OISH		
P.O. BOX 8303	306	P.O. BOX 830306						
MIAMI FL 3328		MIAMI FL 33283						
<b> </b>				•		TE IN THIS SPACE	<del></del>	1
					3. Date Incorporated or Qualifed 10/01/1991		p h	
2. Principal P	Place of Business	2a, Mailing Address			4. FEI Number	Ι Ι Δ	pplied For	١.
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Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional	8
22		27			5. Certifcate of Status Desired	Fee R	equired	
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip ::	Countr	у	8. This corporation owes the curr	rent year Intangible	□No	
24	9. Name and Address of Current	<del></del>	30		Personal Property Tax.  10. Name and Address of New I		LINO	,
,		7.00.000.7.000.00	8	1 Name	10. 110.110	togiotorou rigoint		
	VAT, DANIEL M.		8:	2 01			<u>.</u>	
	6 SW 105TH CT		.   0	2 Street Addit	ess (P.O. Box Number is Not Accepta	aule)	to the thirty suits	
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		•	84	4 City		- 85 Zip	Code	Ì
tage tage comes		99.46 a c 38 34			<u> </u>	FL [ ]		
.11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	s, the abor	ve-named corpo	oration submits this statement for the	purpose of changing its	s registered	l
office or	registered agent, or both, in the State of	f Florida. Such change was aut	thorized b	v the corporation	on's board of directors. I hereby accer	ot the appointment as re	easterea i	
office or agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligation	f Florida. Such change was aut ons of, Section 607,0505, Florid	thorized by da Statute	y the corporations.	on's board of directors. I hereby acce	ot the appointment as re	egistered	
office or agent. I a			thorized by da Statute	y the corporations.			egistered	
office or agent. I a SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTÉ: F	thorized by da Statute Registered Age	y the corporations.	d when reinstating); , :	DATE		(80)
office or agent. I a		and title if applicable. (NOTÉ: F	thorized by da Statute	y the corporations.	d when reinstating): , ,,,,,,,, ;  ADDITIONS/CHANGES TO OF	DATE		(11/98)
office or agent. I a SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTÉ: F	thorized by da Statute Registered Age	y the corporations.	d when reinstating); , :	DATE FICERS AND DIRECTO	ORS IN 12	347/11/98)
SIGNATURE  12.	Signature, typed or printed name of registered agent OFFICERS AND DELVAT, DANIEL M 7136 SW 105TH CT	and title if applicable. (NOTÉ: F	Registered Age  13.  1.1 TITLE  1.2 NAME	y the corporations.	d when reinstating): , ,,,,,,,, ;  ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTO	ORS IN 12	E034/(11/98)
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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 of changed or on an attachment with an address, with all other like empowered.

**SIGNATURE**