PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # \$86650

1. Corporation Name

COVE IN	IVESTMENTS, INC.							(1)		
Principal P ace	e of Business	Mailing Address			in blidte in te			· - ·		
901 UNO LAGO	DR	801 UNO LAGO DRIVE								
JUNO BEACH FL 33408 US		JUNO BEACH FL 33408				O NOT WRITE	IN THIS SP	ACE		
		US			3. Date Incorporated					
					10/11/1991					
2 Oringinal D	lace of Business	2a. Mailing Address			4. FEI Number			Apı	lied For	
1	IACE OF DUSTRIESS	26			55-0713963			Not	Applicable	
Suite, Act.	#. etc.	Suite, Apt. #, etc.			5. Certificate of State	us Desired 1		\$8.75 A		
2					J. Continents of Case			Fee Re		
City & Etat	е	City & State			6. Election Campaig			\$5.00 r		
3		28			Trust Fund Contr			Added to	rees	
Zip	Cour try	Zip	Coun	try	8. This exporation		tyear ntano	gible]Yes]	& No	
4	25	[29]	30		Persor al Propert 10. Name and Addr					
	9. Name and Address of	Current Registered Agent		B1 Name	10, Name and Addi					
in c	SOLOMON II				 	- Nien (Gereie (1)				
	UNO LAGO DRIVE		[4	B2 Street A	k dress (P.O. Bo» Number i	ress (P.O. Box Number is Not Acceptable)				
	O BEACH FL 33408		 	B3						
•	0 00101112 00 100		Ĺ					85 Zip C	-da	
			1	64 City			FLI	·		
11. Pursuant office or ragent. I a		607.0502 and 607.1508, Florida State a State of Florida. Such change was a obligations of, Section 607.0505, Fl				ement for the pu hereby accept i	irpose of ch	anging its i	stered	
	Signature, typed or printed na ne of regis	nared agent and title if applicable. (NOT ERS AND DIRECTORS	T Registered A	lgent signature n	iquired when reinstating) ADDITIONS/CHA		DATE OND	DIRECTO	FS IN 12	
SIGNATURE	Signature, typed or printed na ne of regis OFFICE	nered agent and title if applicable. (NOT	T : Registered A	oent signature n	igi ired when reinstating)		DATE OND			
SIGNATURE	Signature, typed or printed na ne of regis OFFICE D SOLOMON, J.C. II	nared agent and title if applicable. (NOT ERS AND DIRECTORS	T :: Registered A 13. 11 TITL 1.2 NA	Logant signature n	iquired when reinstating) ADDITIONS/CHA		DATE OND	DIRECTO	FS IN 12	
SIGNATURE 12.	Signature, typed of printed ha ne of regis OFFICE D SOLOMON, J.C. II 801 UNO LAGO DR	nared agent and title if applicable. (NOT ERS AND DIRECTORS	13. 11 TITE 12 NAI 13 STE	LE ME REET ADDRESS	iquired when reinstating) ADDITIONS/CHA		DATE OND	DIRECTO	FS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed na ne of regis OFFICE D SOLOMON, J.C. II	nared agent and title if applicable. (NO) ERS AND DIRECTORS DELETE	13. 11 TITE 12 NAI 13 STE	Logant signature n	iquired when reinstating) ADDITIONS/CHA		DATE OND	DIRECTO	FS IN 12	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY-SI-ZIP TITLE	Signature, typed of printed ha ne of regis OFFICE D SOLOMON, J.C. II 801 UNO LAGO DR	nared agent and title if applicable. (NOT ERS AND DIRECTORS	13. 11. 11.11TL 12.NAJ 1.3.STF 1.4.CIT	LE ME REET ADDRESS Y-ST-ZIP	ADDITI(NS/CHAI		DATE OND	DIRECTO	FS IN 12	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY- ST-ZIP TITLE NAME	Signature, typed of printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NO) ERS AND DIRECTORS DELETE	13. 11. 11.11TL 12.NAJ 1.3.STF 1.4.CIT	E REETADORESS Y-ST-ZIP Title: Ch	ADDITIONS/CHAI		DATE OND	DIRECTO	FS IN 12	
SIGNATURE 12. ITILE NAME STREET ADORE SS CITY- S1-ZP TITLE NAME STREET ADORE SS	Signature, typed of printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NO) ERS AND DIRECTORS DELETE	13. 11. 11.11TL 12.NAJ 1.3.STF 1.4.CIT	E REETADORESS Y-ST-ZIP Title: Ch	ADDITI(NS/CHAI	NGES TO OFFK	CERS (NO	DIRECTO	FS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY- ST- ZP TITLE NAME STREET ADORE SS CITY- ST- ZP	Signature, typed of printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NO) ERS AND DIRECTORS DELETE	13. 11. 11.11TL 12.NAJ 1.3.STF 1.4.CIT	E REETADORESS Y-ST-ZIP Title: Ch	ADDITIONS/CHAI	NGES TO OFFK	CERS (NO	DIRECTO	FS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRE SS CITY-S1-ZP TITLE NAME STREET ADDRE SS CITY-S1-ZP TITLE	Signature, typed of printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NOTERS ANL) DIRECTORS DELETE	13. 11. 11.11TL 12.NAJ 1.3.STF 1.4.CIT	E RETADORESS Y-ST-ZP Title: Ch William 500 Uno	ADDITI(NS/CHAI	NGES TO OFFK	CERS (NO	DIRECTO	FS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY- S1-ZP TITLE NAME STREET ADORE SS CITY- S1-ZP TITLE NAME	Signature, typed of printed na ne of regis OFFICE D SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NOTERS ANL) DIRECTORS DELETE	T : Registered A 13. 11TT 12 NAA 1.3 STF 1.4 CIT	E RETADORESS Y-ST-ZP Title: Ch William 500 Uno	ADDITI(NS/CHAI	NGES TO OFFK	CERS (NO	DIRECTO	FS IN 12 Addition	
SIGNATURE 12. ITILE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME STREET ADORE SS STREET ADORE SS STREET ADORE SS	Signature, typed of printed na ne of regis OFFICE D SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NOTERS ANL) DIRECTORS DELETE	T : Registered A 13. 11 TITE 12 NAA 1.3 STF 1.4 CIT	E ME REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change	Addition	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME	Signature, typed of printed na ne of regis OFFICE D SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	nared agent and title if applicable. (NOTERS ANL) DIRECTORS DELETE	T : Registered A 13. 11 TITE 12 NAA 1.3 STF 1.4 CIT	E ME REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTO	FS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME STREET ADORE SS CITY-S1-ZP TITLE NAME STREET ADORE IS CITY-S1-ZP	Signature, typed of printed na ne of regis OFFICE D SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	tared agent and title if applicable. (NOTERS AND DIRECTORS DELETE DELETE	1 : Registered A 13. 11 TITL 12 NAA 1.3 STF 1.4 CIT	E REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno REET ADDRESS Y-ST-ZIP	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change	Addition	
SIGNATURE 12. TITLE NAME STREET ADORE SS CITY-S1-ZIP TITLE NAME STREET ADORE SS CITY-S1-ZIP TITLE NAME STREET ADORE SS CITY-S1-ZIP TITLE	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	tared agent and title if applicable. (NOTERS AND DIRECTORS DELETE DELETE	1 : Registered A 13. 11 TITL 12 NAA 13 STF 14 CIT 32 NAA 33 STF 34. CIT	E REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno REET ADDRESS Y-ST-ZIP	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change	Addition	
SIGNATURE 12. TITLE NAME STREET ADORE IS CITY-ST-ZIP TITLE NAME STREET ADORE IS CITY-ST-ZIP TITLE NAME STREET ADORE IS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	Transition of the Fermions (NOTERS AND DIRECTORS DELETE DELETE DELETE	13. 11 TITL 12 NAM 13 STF 14 CIT 32 NAM 33 STF 34 CIT 4 1 TITL 4 2 NAM 43 STF 44 CIT	E ME REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	ADDITI(NS/CHAI	NGES TO OFFK	CERS NO	DIRECTOI Change	Addition Addition	
SIGNATURE 12. ITILE NAME STREET ADORE SS CITY-ST-ZP TITLE NAME STREET ADORE SS	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	tared agent and title if applicable. (NOTERS AND DIRECTORS DELETE DELETE	1 : Registered A 13. 11 TITL 12 NAA 13 STF 1.4 CIT 32 NAJ 33 STF 34. CR 41 TITL 4. 2 NA 43 STF 44 CIT 5.1 TITL	E ME REET ADDRESS Y-ST-ZP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZP LE ME REET ADDRESS Y-ST-ZP LE REET ADDRESS Y-ST-ZP LE	ADDITI(NS/CHAI	NGES TO OFFK	CERS NO	DIRECTOI Change	Addition	
SIGNATURE 12. ITILE NAME STREET ADORE SS CITY-ST-ZP TITLE NAME STREET ADORE SS CITY-ST-ZP	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	Transition of the Fermions (NOTERS AND DIRECTORS DELETE DELETE DELETE	1 : Registered A 13. 11 TITL 12 NAA 13 STF 1.4 CIT 32 NAJ 33 STF 34. CR 41 TITL 4. 2 NA 43 STF 44 CIT 5.1 TITL 52 NAJ	E ME REET ADDRESS Y-ST-ZP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZP LE ME REET ADDRESS Y-ST-ZP LE ME ME	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change	Addition Addition	
SIGNATURE 12. ITILE NAME STREET ADORE SS CITY-ST-ZIP TITLE	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	Transition of the Fermions (NOTERS AND DIRECTORS DELETE DELETE DELETE	1 : Registered A 13. 11 TITL 12 NAA 13 STF 1.4 CIT 32 NAJ 33 STF 34. CR 41 TITL 4. 2 NA 43 STF 44 CIT 5.1 TITL 52 NAJ 5.3 STF	E ME REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change	Addition Addition	
SIGNATURE 12. ITILE NAME STREET ADORE SS CITY-ST-ZP TITLE NAME	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	Transition of the Fermions (NOTEERS AND DIRECTORS DELETE DELETE DELETE DELETE	13. 11 TITL 12 NAA 13 STF 14 CIT 32 NAA 33 STF 34 CIT 4 2 NA 43 STF 44 CIT 51 TITL 52 NAA 53 STF 54 CIT	E ME REET ADDRESS Y-ST-ZEP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZEP LE ME REET ADDRESS Y-ST-ZEP LE ME REET ADDRESS Y-ST-ZEP	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change Change	Addition Addition	
SIGNATURE 12. ITILE NAME STREET ADORE IS CITY-ST-ZP TITLE NAME STREET ADORE IS CITY-ST-ZP TITLE NAME STREET ADORE IS CITY-ST-ZIP TITLE NAME STREET ADORE IS STREET ADO	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	Transition of the Fermions (NOTERS AND DIRECTORS DELETE DELETE DELETE	3 2 NAJ 3.3 STF 3.4 CIT 4.2 CIT 4.2 CIT 4.2 CIT 5.3 TITE 5.2 NAJ 5.3 STF 5.4 CIT 5.4 CIT 5.1 TITE 5.4 CIT 5.4 CIT 5.1 TITE 5.4 CIT 5.1 TITE 5.4 CIT 5.1 TITE 5.4 CIT	E ME REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change	Addition Addition	
SIGNATURE 12. ITILE NAME STREET ADORE IS CITY-ST-ZIP TITLE NAME STREET ADORE IS CITY-ST-ZIP	Signature, typed or printed na ne of regis OFFICE SOLOMON, J.C. II 801 UNO LAGO DR JUNO BCH FL	Transition of the Fermions (NOTEERS AND DIRECTORS DELETE DELETE DELETE DELETE	3 2 NAJ 3.3 STF 3.4 CIT 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF 5.4 CIT 5.1 TITI 5.2 NAI 5.3 NAI 5.	E ME REET ADDRESS Y-ST-ZIP Title: Ch William 500 Uno ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	ADDITI(NS/CHAI	NGES TO OFFK	DATE CERS IND	DIRECTOI Change Change	Addition Addition	

14. I hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes. I further cirtify 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 unlier oath; that I am an officer or director of the corporation or thustee empoweres to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 1th or Block 13 if chapter of the name and the same legal effect as if made unlier oath; that I am an an attach tent with a product of the corporation of the corporatio CITY-ST-ZIP

64 CITY+ST-ZIP

FILED

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90201 043 ***150.00

= .:

■ 31