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 # **S90927**

1. Corporation Name

Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90031 037 ***150.00

AIH LIFI	BALLOONS, INC.								
Principal Place	e of Business	Mailing Address				- !			1
1300 ELIZABETI		1300 ELIZABETH AVENUE							
STE. B B									
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401						DO NOT WRITE IN THIS SPACE			
US US						3. Date Incorporated or Qualifed			
		1				10/30/1991 4. FEI Number			Applied For
	lace of Business	2a. Mailing Address				65-0292139			Not Applicable
21	H	26 Suite Ant # etc				0070292139			Additional
_ Suite, Apt.	#, etc.	Suite, Apt. #, etc.	a	_		Certifcate of Status Desired		* -	Required '
City & State		City & State				6. Election Campaign Financing			0 May Be
- , '	G	28				Trust Fund Contribution			d to Fees
23 Zip	Country	Zip	Count	trv		8. This corporation owes the curre	ent vear Int		
24	25		30	,		Personal Property Tax.	5111 y 561 1172	Yes	□No
24	9. Name and Address of Currer		50 1			10. Name and Address of New R	legistered .	Agent	
		<u> </u>	18	31 N	ame		-		
LIOC	E, DOMENICK R.		<u> </u>			(D.O. Bay Number is Mak A	hlo)		
1645	PALM BEACH LAKES BLVD.		3 (32 S	treet Addre	ss (P.O. Box Number is Not Accepta	ible)		
SUIT	E 1200		l _E	33					- -
WES	T PALM BEACH FL 33401		L	_ _				11-57	
			8	34 C	ity		FL	85 Zip	p Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was au	itnorizea t	ov tne	corporation	n's board of directors. I hereby accep	t the appoi	ntment as	registered
SIGNATURE	St.	ALCOHOL STANDINGS	Pagistared A		nature required	when reinstation)	DATE		
	Signature, typed or printed name of registered age				nature required	when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	ID DIRECT	TORS IN 12
12.	OFFICERS AN	int and title if applicable. (NOTE: ND DIRECTORS	Registered A	gent sigr	nature required	when reinstating) ADDITIONS/CHANGES TO OF		ID DIRECT	
12.	OFFICERS AN	ID DIRECTORS	13.	gent sigr E	nature required				
12. TITLE NAME	OFFICERS AN D BABINEAU, KAREN L.	ID DIRECTORS	13. 1.1 TITU 1.2 NAM	gent sigr E E					
12. TITLE NAME STREET ADDRESS	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	ID DIRECTORS	13. 1.1 TITLI 1.2 NAM 1.3 STRI	gent sigr E E EET ADD	DRESS 7	ADDITIONS/CHANGES TO OF			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D BABINEAU, KAREN L.	ID DIRECTORS	13. 1.1 TITU 1.2 NAM	gent sigr E E EET ADD	DRESS 7				e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	ND DIRECTORS	13. 1.1 TITU 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITU	gent sign E EET ADD '-ST-ZIP	DRESS 7	ADDITIONS/CHANGES TO OF		Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	ND DIRECTORS	13. 1.1 TITLI 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITLI 2.2 NAM	gent sign E EET ADD '-ST-ZIP E	oress 3	ADDITIONS/CHANGES TO OF		Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	ND DIRECTORS	13. 1.1 TITLI 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITLI 2.2 NAM 2.3 STRI	gent sign E E EET ADD ST-ZIF E E E E E E E E E E E E E E E E E E E	oress 3	ADDITIONS/CHANGES TO OF		Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	ND DIRECTORS	13. 1.1 TITLI 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITLI 2.2 NAM	gent sign E EET ADD F-ST-ZIF E EET ADD	oress 3	ADDITIONS/CHANGES TO OF		Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	OD DIRECTORS DELETE	13. 1.1 TITLI 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITLI 2.2 NAM 2.3 STRI 2.4 CITY	gent sign E EET ADD '-ST-ZIP E EET ADD Y-ST-ZII E	oress 3	ADDITIONS/CHANGES TO OF		☐ Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	OD DIRECTORS DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1-TITL	gent sign E E E E E E E E E E E E E E E E E E E	ORESS ORESS P	ADDITIONS/CHANGES TO OF		☐ Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	OD DIRECTORS DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY - 3.1 TITL 3.2 NAM 3.3 STRI	Gent sign E E E E E E E E E E E E E	ORESS P ORESS	ADDITIONS/CHANGES TO OF		☐ Change	e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	OD DIRECTORS DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT - 3.1 TITL 3.2 NAM	gent sign E E E E E E E E E E E E E	ORESS P ORESS	ADDITIONS/CHANGES TO OF		☐ Change	e
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	D DIRECTORS DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT - 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL	E EET ADD	ORESS P ORESS	ADDITIONS/CHANGES TO OF		Change	e
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	D DIRECTORS DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.2 NAM 3.3 STRI 3.4. CIT 4.1 TITL 4.2 NAM	E E EET ADD	ORESS P ORESS P	ADDITIONS/CHANGES TO OF		Change	e
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	D DIRECTORS DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT - 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL	gent sign E E E E E E E E E E E E E	DRESS DRESS P DRESS P	ADDITIONS/CHANGES TO OF		Change	e
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	D DIRECTORS DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.2 NAM 3.3 STRI 3.4. CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.3	gent sign E E E E E E E E E E E E E	DRESS DRESS P DRESS P	ADDITIONS/CHANGES TO OF		Change	e Addition e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY	gent sign E E EET ADC E EET ADC E EET ADC Y-ST-ZIP E EAE EET ADC T-ST-ZIP E AE EET ADC	DRESS DRESS P DRESS P	ADDITIONS/CHANGES TO OF		☐ Change	e Addition e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CIT 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 TRI 6.1 TITL 6.2 NAM 6.3 STRI 6.4 CITY 6.1 TITL 6.1 TITL 6.2 NAM 6.3 STRI 6.4 CITY 6.1 TITL 6.1 TITL 6.1 TITL 6.2 NAM 6.3 STRI 6.4 CITY 6.1 TITL 6.1 TITL 6.1 TITL 6.2 NAM 6.3 STRI 6.4 CITY 6.1 TITL 6.4 TITL 6	gent sign E E EET ADC E EET ADC E EET ADC Y-ST-ZIP E AE EET ADC T-ST-ZIP E AE EET ADC E EET ADC F E EET ADC E E EET ADC E E E E E E E E E E E E E E E E E E	DRESS P DRESS P DRESS	ADDITIONS/CHANGES TO OF		☐ Change	e Addition e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM	gent sign E E EET ADC E EET ADC E EET ADC Y-ST-ZIP E EET ADC Y-ST-ZIP E AE EET ADC G G G G G G G G G G G G G	DRESS DRESS DRESS DRESS DRESS	ADDITIONS/CHANGES TO OF		☐ Change	e Addition e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.3 ST	gent sign E E EET ADC E EET ADC F E EET ADC Y-ST-ZIP E AE EET ADC F E E E E E E E E E E E E E E E E E E	DRESS DRESS DRESS DRESS DRESS	ADDITIONS/CHANGES TO OF		☐ Change	e Addition e Addition e Addition e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	DELETE DELETE DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY 5.4 CITY 5.4 CITY 5.4 CITY 5.5 CITY 5.7 CITY 5.7 CITY 5.8 CITY 5.7 CITY 5.7 CITY 5.8 CITY 5.8 CITY 5.1 CITY 5.4 CITY 5.4 CITY 5.4 CITY 5.4 CITY 5.7 CI	gent sign E E EET ADC E EET ADC F E EET ADC E EET ADC F E E E E E E E E E E E E E E E E E E	DRESS DRESS DRESS DRESS DRESS	ADDITIONS/CHANGES TO OF		Change	e Addition e Addition e Addition e Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND BABINEAU, KAREN L. 16 RIDGEWOOD CIR.	DELETE DELETE DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY 6.1 TITL 6.1	gent sign E E EET ADC E EET ADC F E E E E E E E E E E E E E E E E E E	ORESS P ORESS P ORESS P ORESS	ADDITIONS/CHANGES TO OF		Change	e Addition e Addition e Addition e Addition

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: