## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jan 29, 1999 8:00am Secretary of State

	1999	DIVISION OF (	CORPORATI	ONS	01.00.1000.0000	halada 50 00	
1. Corporatio	MENT # S91641 ANAGEMENT CORPORATIO	N .			01-29-1999 90025 035	satesas 150.00	
	(2)	Mailing Address			<u> </u>	]  {	
Principal Plac	2	•				•	
3201 N.W. 4TH TERR #69 3201 N.W. 4TH TERR #69 POMPANO BEACH FL 33064 POMPANO BEACH FL 33064							
US US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 11/04/1991		
2. Principal P	Place of Business	2a. Mailing Address	-		4. FEI Number	Арг	plied For
21		26		65-0293093		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	□ \$8.75 A	
City & Stat	te	City & State			6. Election Campaign Financing	□ \$5.00	May Be
23		28		Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Country		8. This corporation owes the curre		□Na.
24	25	29	30		Personal Property Tax.  10. Name and Address of New Re		□No
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New No.	glatered Agent	
VANDANDAIGUE, GUY J 3201 N.W. 4TH TERRACE #69					,	-1-1	
				Street Add	Iress (P.O. Box Number is Not Acceptab	ile)	
PON	MPANO BEACH FL 33064		83		( which is the street of 1 12 th and	J. 18. 11. 18. 18. 18. 18. 18. 18. 18. 18	4.10
á.			84	City	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	**************************************	Ode Tode
•	A Like			1	`	FL _	
office or i	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.0505, Fig	nida Statutes	tne corporati	poration submits this statement for the prion's board of directors. I hereby accept	the appointment as re	jistered
12,	Signature, typed or printed name of registered ager OFFICERS AN	D DIRECTORS	13.	ii signatura radone	ADDITIONS/CHANGES TO OFF		RS IN 12
πιε	PT	☐ DELETE	1.1 TITLE		, g * 23.	☐ Change	☐ Addition
NAME	VANDANDAIGUE, GUY J.		1,2 NAME	İ			
STREET ADORESS	3201 NW 4TH TERR #69	•	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-S	T-ZIP		F1 Channe	[ Addition
TITLE	DS	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	GHISLAINE VANDANDAIGUE		2.2 NAME				
STREET ADDRESS				TADDRESS		•	
CITY-ST-ZIP	POMPANO BEACH FL	☐ DELETE	2. 4 CITY-5 3.1 TITLE	ST-ZIP		Change	Addition
NAME	MERCHET LEET	_	3.2 NAME				
STREET ADDRESS				T ADDRESS	grand and the second second	r kultinor i ali ikia ili tirk	r Graenni.
CITY-ST-ZIP	[환발 (기소의 함 경기)		3.4. CITY-5				
TITLE		☐ DELETE	4.1 TITLE		第二章 数据的概点	Change	Addition
NAME			4. 2 NAME			•	
STREET ADDRESS	1 (2.38) 1. 3 (5.4) (7.1)		4.3 STREE	T ADDRESS			
CITY-ST-ZIP		, <u> </u>	4.4 CITY-S	T-ZIP		Change	☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	•	e e e e e e e e e e e e e e e e e e e	Change	Li vogingii
NAME		. `		TADORESS	1. A 1.31		
STREET ADDRESS	3	के हैं इस्ट्रीक्टक देंग	5.4 CITY-S		Anne e		
CITY-ST-ZIP'	SARROS CONTRACTOR	DELETE	6.1 TITLE		X • · ·	☐ Change	Addition
NAME	\$50 AM 4 A TV		6.2 NAME				
STREET ADDRESS	CONTRACTOR OF THE PARTY OF THE		6.3 STREE	T ADDRESS	•		
CINETI MODINESS	1		I				

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 of 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 or an attachment with an address, with all other like empowered.

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 6/99

Daytime Phone #