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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # S95153

99 JUL -2 PM 12: 39

SECRETARY OF STATE

| | TALLAHASSEE, FLORIDA |
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| | |
| Principal Place of Business Mailing Address | r ndeinene ind heiner blinde blinde eiste einer bilder blinde diest bildir bleit bildir bildir bleir |
| 3741 SUNNY ISLE BLVD STATE SUNNY ISLES BLVD | |
| 90/TE 233 | |
| SUNNY ISLES FL 33160 US US | DO NOT WRITE IN THIS SPACE |
| 05 | 3. Date Incorporated or Qualifed |
| 2. Principal Place of Business 2 2a. Mailing Address | 11/18/1991 4. FEI Number Applied For |
| 21 520 NW 165 St. Rd 126 520 NW | [] * |
| Suite, Apt. #, etc. Suite, Apt. #, etc | /63 Or . K4, 65-0296397 Not Applicable \$8.75 Additional |
| 22 202 27 202 | 5. Certificate of Status Desired Fee Required |
| City & State City & State | f t 6. Election Compaign Financing S5.00 May Po |
| 23 N. Mianu PL 28 M. Mianu | |
| Zip Country _ Zio | Country 8. This corporation owes the current year Intangible |
| | 0 USH Personal Property Tax ☐ Yes ☐ No |
| Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
| BLAIR, YVETTE | 81 Name VVETTE Block |
| 2741 SUNNY ISLES BLD | 82 Street Address (P.Q. Box Number is No Acceptable) |
| SUITE 204 | 520 NW 165 STREET KA. |
| SUNNY ISLES FL-33160 | 83 Suite |
| 991111 10220 12 90100 | 84 City 1 64 1 - 85 Zip Code |
| 44 Pursuant to the provisions of Septions 607 0500 and 607 4500 Final Challenge | N. Milni FL 33/69 |
| office or registered agent, or both, in the State of Plorida. Such change was author | , the above-named corporation submits this statement for the purpose of changing its registered norized by the corporation's board of directors. I hereby accept the appointment as registered a Statutes. |
| agent. I am familiar with, and accept the abligations of, Section 607.0505, Florida | a Statutes. |
| SIGNATURE X LULU / X LULU | 6-30-97 |
| Signature typed or printed game of more good and little 4 explicable (ACCE) Dec | |
| | postered Agent signature required when reinstating) 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12 |
| | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE Change Addition |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| 12. OFFICERS AND DIRECTORS TITLE DAS DELETE NAME BLAIR, YVETTE | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE NAME BLAIR, YVETTE | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE NAME BLAIR, YVETTE STREET ADDRESS 3741 SUNNY ISLES BLVD., STE 233 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE NAME BLAIR, YVETTE STREET ADDRESS 3741 SUNNY ISLES BLVD., STE 233 CITY-ST-ZIP SUNNY ISLES FL | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE -D7/13/99D10312-015 Addition |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE NAME BLAIR, YVETTE STREET ADDRESS 3741 SUNNY ISLES BLVD., STE 233 CITY-ST-ZIP SUNNY ISLES FL TITLE PDT DELETE | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE -0.7/13/99-0.1131.90 |
| 12. OFFICERS AND DIRECTORS TITLE DWS DELETE NAME BLAIR, YVETTE STREET ADDRESS CITY-ST-ZIP SUNNY ISLES BLVD., STE 233 CITY-ST-ZIP SUNNY ISLES FL TITLE PDT DELETE NAME BLAIR, YVETTE | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME ****\$58.75 |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE NAME BLAIR, YVETTE STREET ADDRESS CITY-ST-ZIP TITLE PDT DELETE NAME BLAIR, YVETTE STREET ADDRESS 3741 SUNNY ISLES BLVD., STE 233 SUNNY ISLES FL TITLE PDT DELETE BLAIR, YVETTE STREET ADDRESS 3741 SUNNY ISLES BLVD., STE 233 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.4 STREET ADDRESS 2.5 STREET ADDRESS 2.5 STREET ADDRESS 2.5 STREET ADDRESS 2.6 STREET ADDRESS 2.7 STREET ADDRESS |
| 12. OFFICERS AND DIRECTORS TITLE DVS DELETE NAME BLAIR, YVETTE STREET ADDRESS CITY-ST-ZIP SUNNY ISLES BLVD., STE 233 TITLE PDT DELETE NAME BLAIR, YVETTE STREET ADDRESS 3741 SUNNY ISLES BLVD., STE 233 CITY-ST-ZIP SUNNY ISLES BLVD., STE 233 CITY-ST-ZIP SUNNY ISLES BLVD., STE 233 SUNNY ISLES FL | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP |
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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.

GNATURE:

GNATURE:

GNATURE:

SIGNATURE: