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 # S99955

RICHARD C. MARIANI, P.A.

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90120 007 ***150.00



					─/ I 1804£8## 110 IB4E9 E9E# 18E## D3EU DIE	 	
Principal Place of Business Mailing Address							
6280 SUNSET	DR	6280 SUNSET DR					
SUITE 401	4.0	SUITE 401			DO NOT WRITE IN THIS SPACE		
S.MIAMI. FL. 33143 S.MIAMI FL. 33143				·	-3. Date Incorporated or Qualifed		
					12/12/1991		
Principal Place of Business 2a. Mailing Address							Applied For
	add of Basinoso	26					Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Addition		
404 27					5. Certificate of Status Desired	•	e Required
City & Stat		City & State			6. Election Campaign Financing	\$5	.00 May Be
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Coun	try	8. This corporation owes the current y	ear Intangible	
24	25	29	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Regis	tered Agent	
];	81 Name	·		
	RIANI, RICHARD C.	_		82 Street Add	ress (P.O. Box Number is Not Acceptable)	·-···	
	D SUNSET DR	7 - 1 - 1	[- Sirout radii	to the second of the company		
	TE 401 ————	wite 404	Ī	83			
SM	IAMI FL 33143		-	84 City	 	85	Zip Code
			ľ	84 City		FL °°	Zip 0000
SIGNATURE	m familiar with, and accept the obligations of registered agents.	at and title if applicable (NOTE:	Registered A	gent signature require		ATE .	
12.	OFFICERS AN	D DIRECTORS	13.	1	ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ DELETE	1.1 TITL	E		∵ ☐ Cha	inge 🔲 Addition
NAME	MARIANI, RICHARD C.		1.2 NAM	AE			
STREET ADDRESS			1.3 STR	REET ADDRESS	•		
CITY-ST-ZIP	S MIAMI FL 33143			Y-ST-ZIP		m'ch-	[T] Addition
TITLE		☐ DELETE	2.1 TITL	Æ		[_] Cha	inge [] Addition
NAME			2.2 NAN	AE .	·		
STREET ADDRESS			2.3 STR	REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			and distant
TITLE		☐ DELETE	3.1 TITL		•	Cha	ange
NAME			3.2 NAN	AE	•		
STREET ADORESS			3.3 STR	EET ADDRESS	•		
CITY-ST-ZIP			_	Y-ST-ZIP			ange
TITLE		☐ DELETE	4.1 TITL			☐ Cha	ingo L. Addition
NAME		•	4. 2 NA	1			
STREET ADDRESS	,		1	REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP		Cha	ange Addition
TITLE		☐ DELETE	5.1 TITL 5.2 NAA		•		mge
NAME							
STREET ADDRESS			1	REET ADDRESS	•		
CITY-ST-ZIP		DELETE	6.1 TITL	Y-ST-ZIP	<u> </u>	☐ Cha	ange [] Addition
TITLE .			6.2 NAA		• .		go
NAME			1			•	
STREET ADDRESS			4	REET ADDRESS	-		
CITY OT 710	I		■ 6.4 CIT	Y-ST-ZIP			

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 charges, or on an attachment with an address, with all either like empowered.

SIGNATURE: