## 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 # V01624 1. Corporation Name

ENTERPRISE 2222, INC.

## **FILED** Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90004 031 \*\*\*150.00



							I Imali attali datat time attit time attit time		
Principal Place of Business			Mailing Address						
100 WEST CYPRESS CREEK RD.			100 WEST CYPRESS CREEK RD.				·		
#930			#930 FORT LAUDERDALE FL 33309-2181				DO NOT WRITE IN THIS SPACE		
FORT LAUDERL	T LAUDERDALE FL 33309-2181		TOTAL CARDENDALE VE COUCCETO				3. Date Incorporated or Qualifed		
			•				12/20/1991		
2 Principal P	lace of Business	2a.	Mailing Address				4. FEI Number Applied For		
Z. Frincipair	acc of Business	26	<b>5</b>				65-0306812 Not Applicable		
Suite Apt.	#. etc.	-1	Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional Fee Required		
22		27					5. Certificate of Status Desiled Fee Required		
City & Stat	9		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution Added to Fees		
Zip	Country		Zip	Cou	intry		8. This corporation owes the current year Intangible		
24	25	29		30			Personal Property Tax.		
	9. Name and Address of Current		tered Agent		24	<b>A.</b>	10. Name and Address of New Registered Agent		
	Wall ANDROWA				81	Name	·		
	ISH, ANDREW M.				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	WEST CYPRESS CREEK ROAD	•					ないと、サイト、他の本生にはなるではなった時間である。 いいちゃちゃり は、から、一体性性に、中で、神経性 ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・		
	TE 930				83		See 7.70 COM		
FUH	T LAUDERDALE FL 33309				84	City	85 Zip Code		
and there is	Marine Committee Committee	y .*.	ar <u>ar ar a</u>				poration submits this statement for the purpose of changing its registered ion's heard of directors. I hereby accept the appointment as registered		
agent. I a	•		•				solution submits this statement for the purpose of changing its registered solves board of directors. I hereby accept the appointment as registered		
12.	Signature, typed or printed name of registered agent			13.	- ryont s	agricia i oqui	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	OP OTTO		☐ DELETE	1.1 TI	TLE		Change ☐ Addition		
NAME	PARISH, ANDREW M			1.2 N	AME		• • • • • • • • • • • • • • • • • • • •		
STREET ADDRESS	100 WEST CYPRESS CREEK R	OAD.	SUITE 930	1.3 S	TREET A	DDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL			1.4 C	ITY-ST-Z	ŽIP			
TITLE			☐ DELETE	2.1 T	TLE		☐ Change ☐ Addition		
NAME				2.2 N	AME				
STREET ADDRESS				2.3 S	TREET A	ODRESS			
CITY-ST-ZIP	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	;		240					
TITLE POLICE				2.41	TY-ST-	-ZIP			
NAME 1	The state of the s		☐ DELETE	3.1 T		-ZIP	☐ Change ☐ Addition		
STREET ADDRESS	EN AMERICA B Mater executes option of an	•	☐ DELETE	_	TLE	-ZIP	☐ Change ☐ Addition		
306	WEST SPEECE CETE (CT 50)	•	☐ DELETE	3.1 T 3.2 N	ITLE IAME	-ZIP ADDRESS	☐ Change ☐ Addition		
CITY-ST-ZIP	WEST SPEECE CETE (CT 50)	· 		3.1 T 3.2 N 3.3 S 3.4.0	ITLE IAME TREET A CITY-ST-	ADDRESS	(2) 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
TITLE	REPART CANSESS CELECULO (20)	· 	☐ DELETE	3.1 T 3.2 N 3.3 S 3.4. (	ITLE  IAME  TREET A  CITY-ST-  ITLE	ADDRESS	☐ Change ☐ Addition ☐ Change ☐ Addition ☐ Change ☐ Addition		
TITLE	**************************************	· 		3.1 T 3.2 N 3.3 S 3.4.0 4.1 T 4.21	ITLE IAME TREET A CITY-ST- ITLE NAME	ADDRESS - ZIP	(2) 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
3.71	A TERMINATURA DE COMO.  E ROS  ERRORIOS PER DE COMO.			3.1 T 3.2 N 3.3 S 3.4. C 4.1 T 4. 21	ITLE IAME TREET A CITY-ST- ITLE VAME TREET A	ADDRESS ZIP	(2) 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
TITLE NAME	A TERMINATURA DE COMO.  E ROS  ERRORIOS PER DE COMO.	***	☐ DELETE	3.1 T 3.2 N 3.3 S 3.4.0 4.1 T 4.21 4.3 S 4.4 O	ITLE  TREET A  CITY-ST-  TREET A  TREET A  CITY-ST-	ADDRESS ZIP	☐ Change: "> ☐ Addition		
NAME STREET ADDRESS	A TERMINATURA DE COMO.  E ROS  ERRORIOS PER DE COMO.	***************************************		3.1 T 3.2 N 3.3 S 3.4.0 4.1 T 4.2 I 4.3 S 4.4 C 5.1 T	ITLE IAME TREET A CITY-ST- ITLE VAME TREET A CITY-ST- ITLE	ADDRESS ZIP	☐ Change ☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP	A TERMINATURA DE COMO.  E ROS  ERRORIOS PER DE COMO.	***************************************	☐ DELETE	3.1 T 3.2 N 3.3 S 3.4.0 4.1 T 4.2 I 4.3 S 4.4 C 5.1 T 5.2 N	ITLE IAME TREET A CITY-ST- ITLE VAME TREET A CITY-ST- ITLE	ADDRESS - ZIP ADDRESS - ZIP	☐ Change: "> ☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP	######################################	3.	☐ DELETE	3.1T 32 N 3.3 S 3.4.0 4.1T 4.21 4.3 S 4.4.0 5.1T 5.2 N	ITLE IAME TREET A CITY-ST- ITLE TREET A CITY-ST- ITLE IAME STREET A	ADDRESS ADDRESS ZIP ADDRESS	☐ Change ☐ Addition☐ Change ☐ Addition☐		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PP	***	DELETE	3.1T 32 N 3.3 S 3.4.0 4.1T 4.2F 4.3 S 4.4 C 5.1T 5.2 N 5.3 S 5.4 C	ITLE ITREET A CITY-ST- ITLE VAME STREET A CITY-ST- ITLE IAME STREET A CITY-ST-	ADDRESS ADDRESS ZIP ADDRESS	☐ Change ☐ Addition		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	######################################	Trials	DELETE	3.1T 32N 3.3 S 34.6 4.1T 4.2I 4.3 S 4.4 C 5.1T 52N 5.3 S 5.4 C	ITLE ITREET A CITY-ST- ITLE VAME STREET A CITY-ST- ITLE IAME STREET A CITY-ST-	ADDRESS ADDRESS ZIP ADDRESS	☐ Change ☐ Addition☐ Change ☐ Addition☐		

CITY-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 conformation of the receiver or invisted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in officer or director of the Block 12 or Block 13 if

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS