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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # V03999

ROBERT L. MOORE & ASSOCIATES, P.A.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90181 029 ***150.00



Principal Place of Business 1500 NORTHWEST 49TH ST STREET	Mailing Address	ALSOCIATES, P.A.	_{)		6) 6)5) 160 <u> </u>	
SHITE-524 FOR	FT LANDERDALE FL 33316	5-1735	}	DITC IN THIS S	PACE		
FT. JAUDERDALE FL 33309		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
FORT	M22 and (1942)		12/31/1991	ęu		ľ	
20	1 m 44 W = 4 ddm -		12/3 1/ 199 1 4. FEI Number		T Ans	olied For	
2. Principal Place of Business	2a. Mailing Address	Accounted DA	65-0315243			Applicable	
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Suite, Apt. #, etc.	Suite, Apr. #, etc.	7th Street, Suitezo	5. Certifcate of Status Desired		Fee Re		
City & State	City & State	Lik Sheet Janie 30	6. Election Campaign Financin		\$5.00	May Bo	
⊸ , , ´	28 FORT		Trust Fund Contribution	'a 🗀	Added to	,	
Zip Country	Zip	Country	8. This corporation owes the c	urrent year Intai	naible		
- 11C	29	30	Personal Property Tax.			□No	
9. Name and Address of Current	 _	130	10. Name and Address of Nev	w Registered A	gent		
5. Haine and Address of Current		81 Name					
MOORE, ROBERT L.		<u> </u>		-4-4.4-1			
-1650-GE-17TH ST-SUITE-SOT- FT. LAUDERDALE FL 33316-			ess (P.O. Box Number is Not Acce VoRTHWEST 1914	Street,	SUITE	524	
		84 City FORT	LAUDERDALE	FL	85 Zip C	29	
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	and 607.1508, Florida Statu	tes, the above-named corp	oration submits this statement for t	he purpose of c	hanging its	registered	
agent. I am familiar with, and accept the obligati	f Florida. Such change was a	authorized by the corporation	on's board of directors. I hereby ac	cept the appoint	ment as reg	jistered	
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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 durfee 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 attaching the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or durfee 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 attaching the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or director or director of the corporation or the receiver or director or direc

SIGNATURE:

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