SECONDACTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

S61-364-9433

10.28.99

PROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE: _



FLORIDA DEBARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED

00 JAN 24 AM 8:49

SECRETARY OF STATE
TALLEMBASSEE, FLORIDA

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25 29 30 Intangible Personal Property. Yes N 9. Name and Address of Current Registered Agent Tel# 561-750 - 82 Street Address (P.O. Box Number is Not Acceptable) Alan Schwart #20 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Suffutes, the above pamed corporation submits this statement for the purpose of changing its regist office or registered agent of points and familiar with and accept the obligations of, section 607.0505. Florida Suffutes, the above pamed corporation submits this statement for the purpose of changing its regist office or registered agent of points and familiar with and accept the obligations of, section 607.0505. Florida Suffutes. SIGNATURE SIGNATURE Signature, hybrid or printed name of noglitared agent led title if spilicable. (NOTE: Registered Agent signature required when reinstating) DATE SIGNATURE OFFICERS AND DIRECTORS 1.1 TITLE SIGNATURE OFFICERS AND DIRECTORS 1.2 NAME 1.2 NAME 3 1.00 PALM MUYE Change Chan	
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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 trusted efficiency of the corporation of the receiver or trusted efficiency or Block 12 if changed, or on an attachment with an address.	Jan

Lei NPotel