FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # **V25030**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State ~

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90014 030 ***150.00

BEAUDE	T ANTIQUES, INC.						
Principal Place	e of Business	Mailing Address				4 14 8 1811 9 1411 8	,, 0 ,1 0 ,011 1001
56 N FEDERAL	HWY	1312 SW 17 ST					
DANIA FL 33004 FT. LAUDERDALE FL 33315					DO NOT WRITE IN THIS	SPACE	
US US					3. Date Incorporated or Qualifed	<u> </u>	
	•				03/30/1992		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 65-032210	Ap	plied For
21 26 26					NOT APPLICABLE		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	Additional
22 27					5. Certifcate of Status Desired	Fee Re	quired
City & State City & State					6. Election Campaign Financing	\$5.00	
23 28					Trust Fund Contribution	Added t	o Fees
Zip	Zip Country Zip		Country		8. This corporation owes the current year Inter-		MNo
24	25	29 30	L		Personal Property Tax.	□Yes	(ATINO
	9. Name and Address of Currer	nt Registered Agent	81	Nome	10. Name and Address of New Registered	Agent	
DEA	LIDET MICHAEL G		81	Name			
BEAUDET, MICHAEL G. 1312 SW 17TH ST			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	LAUDERDALE FL 33315		-				
FI. (LAUDENDALE FL 33313		83				
			84	City		85 Zip (Code
	<u> </u>		Ļ_		FL	. [registered
11. Pursuant	to the provisions of Sections 607.050)2 and 607 1508, Florida Statutes, of Florida, Such change was autho	the above orized by	e-named corpo the corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoi	changing its itment as re	gistered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florida	Statutes		• • • • • • • • • • • • • • • • • • • •		
SIGNATURE							
	Signature, typed or printed name of registered age			nt signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTO	DS IN 12
12.		ND DIRECTORS ☐ DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE	DEALIDET MICHAEL C	_			•		_
NAME	BEAUDET, MICHAEL G.		1.2 NAME				{
STREET ADDRESS	1			ADDRESS			
CITY-ST-ZIP			1.4 CITY-S 2.1 TITLE	1-ZIP		[7] Change	Addition
TITLE	D DEVIDES DUVING E	_					
NAME	BEAUDET, PHYLYSS E.				-		
STREET ADDRESS	1012 011 1111 011			TADDRESS			
CITY-ST-ZIP			2.4 CITY-S 3.1 TITLE	11-ZIP		Change	☐ Addition
TITLE	1	——————————————————————————————————————			·		_
NAME			3.2 NAME 3.3 STREE	TADDDESS			
STREET ADDRESS	1						
CITY-ST-ZIP			3.4. CITY-S 4.1 TITLE))- LIF		Change	☐ Addition
TITLE		C. 5222.2	4.2 NAME				_
NAME CTREET ADDRESS	·			TADDRESS	•		
STREET ADDRESS	' ·						
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change	☐ Addition
		<u></u>	5.2 NAME				
NAME STREET ADDRESS		•	5.3 STREE	TADDRESS			
			5.4 CITY-S	}			
CITY-ST-ZIP			6.1 TITLE	+		Change	☐ Addition
NAME		I J DELETE ■	OUT THE	ı			
		U DELETE	6.2 NAME		,	Cliange	
1		U DELETE	6.2 NAME	T ADDRESS		Change	
STREET ADDRESS	i Paratar Molth	↓ DELETE	6.2 NAME			Culturge	

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 changed, or on an attachment with an address, with all other like empowered.