## FILE NOW: FILING FEE AFTER MAY 1ST IS \$5:00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT STATE

Katherine Hs

Secretary of S

DIVISION OF CORPATIONS

## FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90100 026 \*\*\*150.00

DOCUI	MENT # <b>V30577</b>	7	-		
	BOUGHS, INC.		ı		1015 B1811 01815 B1814 81811 (TR)
Principal Place	of Business	Mailing Address	<del>                                     </del>	- 3 18911 8(1980 )iill seini ditii (691: 108: 410); a	(#13 B101( #181) B1811 B1811 1-21
6310 HUTCHINS		6310 HUTCHINSON AU	}		
MIAMI LAKES F US	L 33014	MIAMI LAKES EL 33014		DO NOT WRITE IN THIS	SPACE
00/		,00	i	3. Date Incorporated or Qualifed	
•	_			04/20/1992	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
27 5441	N.W. 15912 Stre	et 26 5441 N.W.	195 SNOOT	65-0327043	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	•	27			
City & State		City & State Lake	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 33014	Centry A	This corporation owes the current year in Personal Property Tax.	tangible □ Yes □ No
4 35014	9. Name and Address of Currer	29   <u>5 00   4   30  </u> nt Registered Agent	1.7.11.	10. Name and Address of New Registered	
	e, manie and Address of Odifer		81 Name		
	el, ronald L		20 00 144	ess (P.O. Box Number is Not Acceptable)	
	N FEDERAL HWY		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	E 360		83	-	
BOC	A RATON FL 33431		84 City		85 Zip Code
	·	•		Fl	_ }
office or re agent. I ar			العب المراجد ال	poration submits this statement for the purpose of on a board or directors. Thereby accept the appointment of the purpose of t	ointment as registered
		nt and title if ap <sub>rii</sub> cable. (No i E: Regii	_\· <del></del>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12.	DPV	ID DIRECTORS	1.1 TLE	ADDITIONS/GITANOES TO STITISENS A	☐ Change ☐ Addition
TITLE	FIORENZI, JENNIFER DAVIS		1.2 NATE		
NAME STREET ADDRESS	6310 HUTCHINSON RD	·	1.3 SREET ADDRESS		
CITY-ST-ZIP	MIAMI LAKES FL	!	1.4 CY-ST-ZIP	•	
TITLE	DVS	☐ DELETE	2.1 LE		☐ Change ☐ Addition
NAME	MENEZES, TERRI LYNN		2.2 IME		
STREET ADDRESS	19416 EAST LAKE DRIVE		2.3 REET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33015	;	2.4 Y-ST-ZIP		
TITLE		☐ DELETE	.3.1 <b>E</b>		☐ Change ☐ Addition
NAME		• •	3.2 E		
STREET ADDRESS		ı	3.3 SET ADDRESS		
CITY-ST-ZIP		DELETE	3.4 r-ST-ZIP		☐ Change ☐ Addition
TITLE			4.20 E		
NAME.			4.3 ET ADDRESS		
STREET ADDRESS			4.4 ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	5.1	ا بسود الله عليه المسلم	☐ Change ☐ Addition
NAME		•	5.2		
STREET ADDRESS			5.3 ET ADORESS		
CITY-ST-ZIP	\$1.67		5.4 ST-ZIP		
TITLE	74 5	☐ DELETE	6.11		☐ Change ☐ Addition
NAME	1		62		
STREET ADDRESS	s		6.3 ET ADDRESS		
CITY-ST-ZIP			6.4 ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the extion 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 an it 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 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 I impowered.

SIGNATURE: \_