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

Mailing Address

JUPITER FL 33458

STE C6

612 N. ORANGE AVE.

PROFIT CORPORATION ANNUAL REPORT 1999

Principal Place of Business 612 N. ORANGE AVE.

STE C6

JUPITER FL 33458



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90059 007 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

DOCUMENT # V38011 1. Corporation Name ALE HOUSE CHARTERS, INC.

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2. Principal Pla	ace of Business	2a	. Mailing Address				7	4. FEI Number	_				Ap	plied For	
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Suite, Apt. #	ŧ, etc.		Suite, Apt. #, etc.					5. Certifcate of		horizad	· 🗅		\$8.75 A		
2		27					- (5. Certificate of	Status t				Fee Re	quired	
City & State	<u> </u>	City & State					_	6. Election Can	npaign F	inancing			\$5.00	Мау Ве	
3		28	28					Trust Fund (, -	_			Added t	o Fees_	
Zip	Country	intry		-+-	8 This corpora	tion owe	s the cu	rrent ve	ar Inta	naible"					
¬ ˙	25	-		8. This corporation owes the current year Intangible Personal Property Tax.						No					
<u> </u>	9. Name and Address of Current F	29 29		30	Γ		1	IO. Name and	<u> </u>		Regist	ered A	gent		
	0. Hallo dia / da loca 0. Garage				81	Name									
MILLER JOHN W 18775 SE RIVER RIDGE ROAD TEQUESTA FL 33469															
						82 Street Address (P.O. Box Number is Not Acceptable) 83 AVECTION OF ANGLE AVECTOR AN									
					84	City					-		85 Zip (Code	
						00	PT.	TETO				<u>FĻ</u>	1 33	<u>438</u>	
I1. Pursuant t	to the provisions of Sections 607.0502 agistered agent, or both, in the State of	and (307.1508, Florida Statute	s, the a	bove-	-named co	rporat	tion submits this	stateme	ent for the	e purpo ent the	se ot c annoin	nanging its. Iment as re	registered	
office or re	egistered agent, or both, in the State of in familiar with, and accept the obligation	FIORI DS 0	da. Such change was au f. Section 607.0505. Flori	ınonzec da Stati	บบบ utes	ne corpora	IIIOII S	board of direct) S. 1 (16)	eby acc	spi alo	аррош	unjoint do to	5.510.55	
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SIGNATURE	Signature, typed or printed name of registered agent at	nd title	if applicable (NOTE.)	Registered	Agent	signature requ	ired whe	en reinstating)			DA				
2.	OFFICERS AND			13.				ADDITION\$/	CHANG	9 10 0	FFICE	RS ANI	D DIRECTO		
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indicated officer or	pertify that the information supplied with on this annual report or supplemental a director of the corporation or the receive or Block 13 if changed, or on an attach	innu: er or	al report is true and accur trustee empowered to ex	rate and recute t	that his re	my signat port as ree	ure sr quired	isa ani aven iler	ne legal	епест аз	з и піяп	ie imue	ar Daun, undu	l airi air	