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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **V64445**

1. Corporation Name

HE KEEN & ASSOC INC

U.E. NEEM & AGOOO! INC.	
Principal Place of Business	Mailing Address
2900 E COMMERCIAL BLY D STE 212 F T LAUD FL 33308	2000 E-COMMERCIAL BLVD S TE-212 -FT-LAUD-FL-33308•

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90147 029 ***150.00



890 & COMMENCIAL SEV D 872 212 F T LAUD FL 3338 8	STE-212 FT_LAUD-FL-33300*		DO NOT WRITE IN TH	S SPACE
US-	46-		3. Date Incorporated or Qualifed	
•			09/14/1992	
2. Principal Place of Business	2a. Mailing Address	_	4. FEI Number	Applied For
27 99 5/W 12Th AUE	26 99 5/w 12th	1 Aug.	65-0353045	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Boca Raton 71.	City & State Rate	n 7l.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 33484 25 U.S.	Zip Cou 29 33 48 30	entry	This corporation owes the current year leading Personal Property Tax.	ntangible ⊠ Yes □No
9. Name and Address of Current I	Registered Agent		10. Name and Address of New Registered	d Agent
HEFINGER, ROBERT L.		81 Name	•	
2800 E COMMERCIAL BLVD 99 5/	WIZTH ANE.	82 Street Addre	ss (P.O. Box Number is Not Acceptable)	
STE 212 ET LAUD EL 22308 BOCA C	aton 7.l.	83		
33/80	33486	84 City	F	L 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	and 607.1508, Florida Statutes, the a Florida. Such change was authorized	bove-named corporation	ration submits this statement for the purpose o's board of directors. I hereby accept the app	of changing its registered ointment as registered

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

HEFINGER, ROBERT L 3840 N. FEDERAL HIGHWAY UGHTHOUSE POINT FL 33664 KLEIN, JEANNE H STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 22 NAME 23 STREET ADDRESS GHO N. FEDERAL HIGHWAY. TITLE D DELETE 33 STREET ADDRESS GHO N. FEDERAL HIGHWAY. TITLE D DELETE 34 CITY-ST-ZIP DELETE 31 TITLE D DELETE 31 TITLE A-72. 32 V86 TITLE D DELETE 41 TITLE D DELETE 51 TITLE D DELETE 51 TITLE D CHAPTHOUSE POINT FL 33664 TITLE D DELETE 51 TITLE D CHAPTHOUSE POINT FL 33664 TITLE D DELETE 51 TITLE D CHAPTHOUSE POINT FL 33664 TITLE D DELETE 51 TITLE S1 STREET ADDRESS A4 CITY-ST-ZIP DDLAF (CA+M) TA 4 V4. TOLATE DOLATE Change Addition Addition Addition Addition Addition Addition Addition Change Addition Addition ADDLAF (CA+M) TA 33 V86 Change Addition Addition Addition Addition Change Addition Addition ADDLAF (CA+M) TA 4 V4. TA 33 V86 Change Addition Addition Addition Addition Addition Addition ADDLAF (CA+M) TA 4 V4. TA 4 V4. TA 53 V86 Change Addition Addition Addition Addition Addition ADDLAF (CA+M) TA A V4. TA	SIGNATURE	Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE					
HEFINGER, ROBERT L 3840 N. FEDERAL HIGHWAY UGHTHOUSE POINT FL 33664 MAME SIREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33664 MAME SIREET ADDRESS CITY-ST-ZIP DELETE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP DALA RATHO 7L. 33 7 8 L CONTY-ST-ZIP DELETE 22 NAME 23 STREET ADDRESS CITY-ST-ZIP DELETE 11 TITLE D CITY-ST-ZIP DELETE 12 NAME 23 STREET ADDRESS CITY-ST-ZIP DELETE 14 TITLE D CITY-ST-ZIP DELETE 15 TITLE D CITY-ST-ZIP DELETE 16 TITLE D CITY-ST-ZIP DELETE 16 TITLE D CITY-ST-ZIP DELETE 17 1 JW 12 TA AVG. CITY-ST-ZIP DELETE 16 TITLE DELETE 17 1 JW 12 TA AVG. CITY-ST-ZIP DELETE 17 1 JW 12 TA AVG. CITY-ST-ZIP DELETE 16 TITLE DELETE 17 1 JW 12 TA AVG. CITY-ST-ZIP DELETE 17 1 JW 12 TA AVG. CITY-ST-ZIP DELETE 17 1 JW 12 TA AVG. CITY-ST-ZIP DELETE 18 TITLE DELETE 18 TIT	12.	OFFICERS AND DIRECTORS	13.				
STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 ITHE S KLEIN, JEANNE H STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 DELETE 31 TITLE D DELETE 33 STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 DELETE 33 STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 DELETE 33 STREET ADDRESS CITY-ST-ZIP UGHTHOUSE POINT FL 33064 DELETE 41 TITLE D DELETE 51 TITLE D DELETE D D D D D D D D D D D D D D D D D D	TITLE	P DELETE	1.1 TITLE	Change ☐ Addition			
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CITY-ST-ZIP 0.4 Ultr-31-ZIP 0.	CITY-ST-ZIP		6.4 CITY-ST-ZIP				

I hereby certify that the information supplied with this filling do indicated on this annual report or supplemental ennual sport officer or director of the corporation or fine receiver or suspensions. Block 12 or Block 13 if changed, or on an attachment with an is fot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the company of the compan