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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am Secretary of State Katherine Harris 03-01-1999 90102 046 ***158.75

DOCUMENT # 1. Corporation Name	V65113		
INNER CHI, INC.			

	, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
Principal Place	of Business		Mail	ling Address					18 tili mimii mimii mi		
5358 SHIRLEYDRIVE 5358 SHIRLEYDRIVE JUPITER FL 33458 JUPITER FL 33458					DO NOT WRITE	E IN THIS SPA	.CE				
								3. Date Incorporated or Qualifed 09/18/1992			
	ace of Business		2a.	Mailing Address				4. FEI Number			lied For
	Comme	ru way	26	408 Co	mm	wa 4	<u>ray</u>	65-0357286			Applicable
Suite, Apt.	suite 4	<u> </u>	27	Suite, Apt. #, etc.	<u> 1614</u>	ľ		5. Certifcate of Status Desired		Fee Req	
City & State	oiter Fl	•	28	City & State	ikr	FL	-	Election Campaign Financing Trust Fund Contribution	1 (55.00 N Added to	- 1
Zip	~9	Country		Zip > 3 / ~	0Cc	ountry		8. This corporation owes the curre			_
₂₄ 334	25	US	29	2247	0 " 30	USA	''	Personal Property Tax.			□No
_	9. Name and	Address of Curre	nt Registe	ered Agent				10. Name and Address of New Ro	egistered Ager	nt	
1445	TIMA DA					81 N	lame (R.M. Martina			ļ
	TINA, R.M.	-				82 S	treet Addre	ss (P.O. Box Number is Not Acceptate	ole) A -	1	
	SHIRLEYDRIV	Ē					40	Commerce way	SWK	4	
JUPI	TER FL 33458					83		·			
						84 C	City 3 a	piter	FL 8	Zip C	ode 58
							50	P (000)	F L	33	430
-									jurpose oi ciiai	iging its i	egistereu
11. Pursuant t	to the provisions	of Sections 607.050	02 and 60 Florida	7.1508, Florida St LSuch change wa	atutes, the	above-na ed by the	amed corporation	n's board of directors. I hereby accept	the appointme	nt as reg	istered
11. Pursuant to office or reagent. I ar	to the provisions egistered agent, m familiar with, a	of Sections 607.050 or both, in the State and accept the	02 and 60 of Florida Mons of	7.1508, Florida St Such change was Section 607.0505,	atutes, the as authorize Florida Sta	above-na ed by the atutes.	orporation	n's board of directors. I hereby accept	the appointme	nt as reg	istered
SIGNATURE	_			e.Marti	⋈⋗			ration submits this statement for the position of directors. I hereby accept	41 (17)	nt as reg	istered
SIGNATURE	_	ted name of registered age	ent and title if	applicable. (N	NOTE: Register	red Agent sigr		when reinstating)	DATE		
SIGNATURE	Signature, type or po-		ent and title if	applicable. (N	NOTE: Register	red Agent sign	nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE		
SIGNATURE 12. TITLE	Signature, type or pe	OFFICERS A	ent and title if	applicable. (N	NOTE: Register	red Agent sign 3. TITLE	nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	RECTO	RS IN 12
SIGNATURE 12. TITLE NAME	PST MARTINA, R.I	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 1.1 1.2	red Agent sign 3. TITLE NAME	nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	RECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 1.1 1.2 1.3	red Agent sign 3. TITLE NAME STREET ADD	nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	RECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP	PST MARTINA, R.I	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 1.1 1.2 1.3 1.4	red Agent sign 3. TITLE NAME STREET ADD	nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	IRECTOR	RS IN 12 ☐ Addition
SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1	red Agent sign 3. TITLE NAME STREET ADD CITY-ST-ZIP TITLE	nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	RECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 1.1 1.2 1.3 1.4 E 2.1 2.2	TITLE NAME STREET ADD CITY-ST-ZIP TITLE	DRESS A	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	IRECTOR	RS IN 12 ☐ Addition
SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3	TITLE NAME STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD	DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	IRECTOR	RS IN 12 ☐ Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	red Agent sign 3. TITLE NAME STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD STREET ADD	DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (N	NOTE: Register 13 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC 4. CITY-ST-ZIP	DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	IRECTOR	RS IN 12 ☐ Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIF TITLE NAME STREET ADC 4 CITY-ST-ZIF TITLE NAME	DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 3.3	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME NAME NAME STREET ADC	DRESS DRESS PDRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS) DELETE DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 3.3 3.4	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIF TITLE NAME STREET ADC 4 CITY-ST-ZIF TITLE NAME 4 CITY-ST-ZIF STREET ADC 5 STREET ADC 6 STREET ADC	DRESS DRESS PDRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 3.3 3.4 E 4.1	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC 5 CITY-ST-ZII TITLE	DRESS DRESS PDRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS) DELETE DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 3.3 3.4 E 4.1	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC 5 STREET ADC 6 STREET ADC	DRESS PDRESS PDR	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS) DELETE DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 3.3 3.4 E 4.1 4.2 4.3	TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE 2 NAME STREET ADC STREET ADC STREET ADC	DRESS DRESS DRESS DRESS DRESS DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 3.3 3.4 E 4.1 4.2 4.3 4.4	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE 2 NAME STREET ADC CITY-ST-ZII	DRESS DRESS DRESS DRESS DRESS DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	applicable. (No. TORS) DELETE DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 4.3 4.4 E 4.3 4.4 E 5.1	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE 2 NAME STREET ADC CITY-ST-ZIF TITLE	DRESS DRESS DRESS DRESS DRESS DRESS DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	DELETE	NOTE: Register 13 E 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 4.2 4.3 4.4 E 5.1 5.2	red Agent sign 3. TITLE NAME STREET ADC CITY-ST-ZIP TITLE NAME STREET ADC 4 CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE NAME STREET ADC CITY-ST-ZII TITLE CAMBE STREET ADC CITY-ST-ZII TITLE NAME STREET ADC	DRESS P DRESS P DRESS P DRESS P	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 4.1 4.2 4.3 4.4 E 5.1 5.2 5.3	TITLE NAME STREET ADD CITY-ST-ZIF TITLE STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF STREET ADD CITY-ST-ZIF STREET ADD CITY-ST-ZIF STREET ADD STREET ADD	DRESS P DRESS P DRESS P DRESS P DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 4.3 4.4 E 5.1 5.2 5.3 5.4	TITLE NAME STREET ADC CITY-ST-ZIF TITLE NAME STREET ADC GITY-ST-ZIF TITLE NAME GITY-ST-ZIF TITLE NAME STREET ADC CITY-ST-ZIF TITLE NAME STREET ADC CITY-ST-ZIF TITLE STREET ADC CITY-ST-ZIF STREET ADC CITY-ST-ZIF	DRESS P DRESS P DRESS P DRESS P DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 4.3 4.1 4.2 4.3 4.4 E 5.1 5.2 5.3 5.4	TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD GITY-ST-ZIF TITLE NAME STREET ADD GITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE	DRESS P DRESS P DRESS P DRESS P DRESS	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MARTINA, R.I 5358 SHIRLE	OFFICERS At	ent and title if	DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 E 2.1 2.2 2.3 2.4 E 3.1 3.2 4.3 4.4 E 5.1 5.2 5.3 5.4 E 6.2	TITLE NAME STREET ADC CITY-ST-ZIF TITLE NAME STREET ADC GITY-ST-ZIF TITLE NAME GITY-ST-ZIF TITLE NAME STREET ADC CITY-ST-ZIF TITLE NAME STREET ADC CITY-ST-ZIF TITLE STREET ADC CITY-ST-ZIF STREET ADC CITY-ST-ZIF	DRESS P DRESS P DRESS P DRESS P	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CICERS AND D	Change Change Change	RS IN 12 Addition Addition Addition

14. 1 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 actives, with all other like empowered.

SIGNATURE:

会可RED INTED NAME OF SIGNING OFFICER OR DIRECTOR

5617483256