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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V67531

Corporation Name

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

04-30-1999 90082 043 ***150.00

BRUCE	VERNUN ENTERPRISES, II	NC.								
Principal Place	of Business	Mailing Address				- !₩!	iti Bilbin Billi lokti fira	18 EN 92 N.B. 01.	ATS MINST MINIT OFFIT	Bilbin Orally Leas
4331 SW 2 CT PLANTATION FL		4331 SW 2 CT PLANTATION FL 33317					,			
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2. Principal Pl	lace of Business	2a. Mailing Address		-		4. FEI Num	iber .		L A	optied For
21		26				65-035	5 7350			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certifcat	e of Status Desired			Additional
22		27							Fee Re	equired
City & State	e	City & State					Campaign Financir	^{rg} 🗆		May Be
23	·	28		_			nd Contribution			to Fees
Zip	Country	Zip	Count	itry			poration owes the c	urrent year		
24	. , 🚁 🖂 [25]	29	30				Property Tax.	Da-inta-	☐ Yes	No
	9. Name and Address of Curre	ent Registered Agent		81 N	Name	10. Name a	nd Address of Ne	w Register	ed Agent	
VEDI	NON, BRUCE		,	ין וי	vame					
	SW 2 CT		1	82 5	Street Addre	ess (P.O. Box I	Number is Not Acce	eptable)		
			L							
PLAI	NTATION FL 33317		18	83						
				84 (City				85 Zip	Code
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office or r	egistered agent, or both, in the Stat	e of Florida, Such change was	authorized t	by the	arned corpo e corporatio	oration submits on's board of dir	rectors. I hereby ac	cept the ap	pointment as re	gistered - " "
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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 changen, or on an aftachment with an address, with all other like empowered.

SIGNATURE:

RECUNDEDA. VERNON OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR