SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # VETE

**FILED** Jul 30, 1999 8:00 am Secretary of State 07-30-1999 90003 018 \*\*\*550.00

1. Corporation	n Name	" VO/OI	3 °								
MAX DE	EVELOPER	IS, INC.					5	98857°- 9000	)3 - Y8	, .	
							4.40				
Principal Place	e of Business		Mailing /	Address	.,		A TABLE STORY COME STORY		1811 81811 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
901 N CONGR	RESS ACE			CONGRESS							
B101(W) B101(W) B00YMTON DEACH EL 22426 B00YMTON DEACH EL 224					3426	•	DO NOT WRIT	F IN THIS S	SPACE		
BOYNTON BEACH FL 33426 BOYNTON BEACH FL 334					J420		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
							09/30/1992				
2. Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied	For
21			26 525 Hauthonn				65-0358968			Not App	licable
Suite, Apt. #, etc.			Suite	Apt. #, etc.			5. Certificate of Status Desired			5 Additio	
22			27 54				Fee Required				
City & State	e			& State		CA	6. Election Campaign Financing			0 May	
23		0	28 6 6	N Die	Cou	<u> </u>	Trust Fund Contribution		Adde	ed to Fee	2\$
Zip	-	Country	29 0	2101		1.5 <b>1</b>	<ol> <li>This corporation owes the current Intangible Personal Property.</li> </ol>		Yes	□No	
24		25 and Address of Curre			30	7,707	10. Name and Address of New R			<u></u>	
	<i>9.</i> 1101110	and Address of Garre				81 Name					
		HN JOSEPH				20 00000	(D.O. Day Number in Not Assessed	blo)			
	N CONGR	ess ave				82 Street Add	dress (P.O. Box Number is Not Accepta	DI <del>O</del> )			
	101(W)					83					
BO	YNTON BEA	ICH FL 33426				24			Tor T	ip Code	
						84 City		FL	85   Z	ip Code	
agent. I a	to the provisi registered ag am familiar wi	ons of sections 607.050 ent, or both, in the State th, and accept the oblig	02 and 607.150 e of Florida. Su gations of, sect	08, Florida Statu uch change was tion 607.0505, F	tes, the about tes, t	ove-named corporate the corpor	oration submits this statement for the pution's board of directors. I hereby accep	rpose of cha t the appoint	inging its tment as	register register	ed ed
agent. I a	am familiar wi	th, and accept the oblig	gations of, sect	able. (*	NOTE: Registe	utes.	iquired when reinstating)	DATE			
agent. I a SIGNATURE .	am familiar wi	th, and accept the oblig	gations of, sect	able. (*	NOTE: Registe	red Agent signature re		DATE	DIREC	TORS II	- N 12
agent. I a SIGNATURE .  12. TITLE	Signature, typed o	th, and accept the oblig or printed name of registered age OFFICERS AF	gations of, sect	able. (*	NOTE: Registe	red Agent signature re	iquired when reinstating)	DATE		TORS II	
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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 cetting that I am an officer or director of the corporation or the receiver or trustee empowared 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 address.

SIGNATURE: \_

858-232-2200

Daytime Phone #