FILED Apr 08, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

•	1999 DIVISION OF CORPORATIONS			04-08-1999 90053 018 ***150.00			
1. Corporation	MENT # V7297 NAME PROPERTIES, INC.	'4				811 213 11 2 1811 4	1814 8181+ 18 2 1
Principal Place	of Business	Mailing Address				<u> </u>	IOTO AIRIO LAOL
827 NE 20TH AVENUE 827 NE 20TH AVENUE							
FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33 US US			DO NOT WRITE IN THIS SPACE				
us		00			3. Date Incorporated or Qualifed		
	<u> </u>			-,	10/21/1992	 >	
<u> </u>	ace of Business	2a. Mailing Address			4. FEI Number	_ 	plied For t Applicable
Suite, Apt.	# otc	Suite, Apt. #, etc.			65-0362788	\$8.75 A	
22	r, etc.	27			5. Certificate of Status Desired	Fee Re	
City & State	 -	City & State		·	6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	o Fees
Zip			Country	•	8. This corporation owes the current year Inta		D No
24	25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax. 10. Name and Address of New Registered A		-70.00
	9, Name and Address or Cur	Tent Registered Agent	81	Name	10. Name and Passes of No. 100, 100, 100, 100, 100, 100, 100, 100		•
RICH	IARD, GAETAN		00	Otropa 8 d	dress (P.O. Box Number is Not Acceptable)		
827 N. E. 20TH AVENUE			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
FOR	r lauderdale FL 33304		83		-		
			84	City	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statutes,	the abov	e-named co	moration submits this statement for the numose of	changing its	registered
office or re	egistered agent, or both, in the St	ate of Florida. Such change was auth ligations of, Section 607.0505, Florida	orizea by	the corpora	tion's board of directors. I hereby accept the appoir	itment as reg	gistered
SIGNATURE					ired when reinstating) DATE		
12.	Signature, typed or printed name of registered	AND DIRECTORS	13.	ur siðirs/nie ierto	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	IRS IN 12
TITLE			1.1 TITLE			☐ Change	Addition
NAME	RICHARD, GAETAN	1.2 N					}
STREET ADDRESS			1.3 STREE	TADDRESS			
CITY-ST-ZIP	, 0,		1.4 CITY-S	T-ZIP			677 A 4 191
TITLE			2.1 TITLE			☐ Change	Addition (
_NAME	SICK, JEFFREY					- -	~
STREET ADDRESS	god he had here			T ADDRESS			1
CITY-ST-ZIP TITLE			2. 4 CiTY-5 3.1 TITLE	51-217		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP	pang 1 = _ 1		3.4. CITY-8	ST- ZIP			
TRILE	☐ DELETE 4.1 T		4.1 TITLE	}		Change	☐ Addition
NAME			4. 2 NAME		•		}
STREET ADDRESS				TADORESS			1
CITY-ST-ZIP			4.4 CITY-S 5.1 YITLE	IT-ZIP		Change	Addition
TITLE NAME			5.2 NAME				_
STREET ADDRESS				TADORESS			
CITY-ST-ZIP"			5.4 CITY- S	IT-ZIP			
TITLE ""		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME	* * * * * * * * * * * * * * * * * * * *		6.2 NAME				

CITY-ST-ZIP 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 of 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 chapted, or on an attachment with an address; with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

954-462-6910