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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P96000068761

FLORIDA DEPARTMENT OF STATE

Kathe ine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90291 048 ***150.00

	S INDUSTRIES, INC.										
Principal Place of Business Mailing Address											
8533 E. PORTLAND SCOTTSDALE AZ 85257-4121 8533 E. PORTLAND SCOTTSDALE AZ 85257-4121 SCOTTSDALE AZ 85257-412			121				DO NOT WR	ITE IN TH	IS SPACE	Ē	
						3. Date fr	corporated or Qualifed				
							/1996				
2. Principa P	face of Business	2a. Mailing Address				4. FEI Nu				Apr	lied For
21		26				65-06	92738				Applicable
Suite, Act.	#, etc.	Suite, Apt. #, etc.				5. Certifc	ate of Status Desired		•	75 A	iditional uired
_ City & Stat	le	City & State				n Campaign Financing		• -		/lay Be	
23		28					und Contribution				Fees
Zip	Cour try	Zip Cour 30					8. This corporation owes the current year Persor al Property Tax.		ntangible No		
24	9. Name and Address of Current		1301				and Address of New	Registere			
				81	Name						
	PORATION COMPANY OF MIAMI SOUTH BISCAYNE BOULEVARD			82	Street Ac	dress (P.O. Box	Number is Not Accept	able)			
1600 MIAMI CENTER MIAMI FL 33131			Ì	83							
				84	City			 F	85	Zip C	ode
11 Dureus et	to the provisions of Sc ctions 607.0502	and 607 1508 Florida Statu	tes the at	nove	-named ccr	rporation submi	s this statement for the	purpose	of change	na its r	egistered
office cr r	registered agent, or bo h, in the State of m familiar with, and accept the obligat	of Florida. Such change was a	authorized	bv 1	the corporat	tion's board of	irectors. I hereby acce	pt the app	ointment	as reg	stered
SIGNATURE	Signature, typed or printed naine of registered agent	and title if applicable (NCT	Registered	Δοορ	t signature rent i	ired when reinstating)		DATE			
12.	OFFICERS AN	·	13.	, igo i	- digitalia i a i a i a		NS/CHANGES TO OF		AND DIRE	СТО	S IN 12
TITLE	D	☐ DELETE	1.1 TIT	LE					Ch:	ange	Addition
NAME	MARCUS, PHILIPPE			1.2 NAME							İ
STREET ADDRESS	8533 E. PORTLAND		1.3 ST	1.3 STREET ADDRESS							
CITY-ST-ZIP	COTTSDALE AZ 85257-4121			1.4 CITY-ST-ZIP					[] Ch		Addition
TITLE	D			2.1 TITLE						ange	L Addition
NAME	MARCUS, VALERIE				4 DDD=00						
STREET ADORE 3S	8533 E. PORTLAND SCOTTSDALE AZ 85257-4121		2.3 STREET ADDRESS 2.4 CITY- ST-ZIP								
CITY-ST-ZIP	SCUTTSDALE AZ 85257-4121	J113DALE AZ 83237-4121			1-211			•••	☐ Ch.	ange	Addition
NAME		3.2 N									ļ
STREET ADDRESS			3 3 STF	REET	ADDRESS						
CITY-ST-ZIP			3.4. CIT	TY-SI	T-ZIP						
TITLE		☐ DELETE	4.1 TITLE						☐ Ch	ange	☐ Addition
NAME			4 2 NA	ME							
STREET ADDRE: IS			4.3 ST	REET	ADDRESS						
CITY-ST-ZIP			4.4 CIT		r-ZIP						
TITLE		☐ DELETE	5.1 TIT						☐ Ch	ange	☐ Addition
NAME			5.2 NA		*000000						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			5.4 CIT	1-21	- ZIP						- Addition
TITLE		□ DELETE	6.1 TIT	LΕ	1				Ch	ange	Addition I
NAME		☐ DELETE	6.1 TIT 6.2 NA						☐ Ch	ange	☐ Addition

6.4 CITY-ST-ZIP 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 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 address, with a light empowered.

SIGNATURE:

(602) **87**4 1569

CR2E034 (11/98)