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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # 49072

1. Corporation Name

0721 (8)

BECKER & POLIAKOFF, P.A.

FILED Jan 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								* 150161 01010 10161 00111 40010 11001 from	I I I I I I I I I I I I I I I I I I I	1684 91911 916	li denii (Băt	
3111 STIRLING RD. 3111 STIRLING RD.											•	
FORT LAUDERDALE FL 33312				FORT LAUDERDALE FL 33312				DO NOT WOITE IN		D405		
								DO NOT WRITE IN	I THIS S	PACE		
	•							 Date Incorporated or Qualified 12/22/1975 				
2. Principal Place of Business				2a. Mailing Address				4. FEI Number	1.74.4			
21				26				59-1640708		Not Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional	
22				27				5. Sommodio S. Status Besilios			equired	
City & State				City & State				6. Election Campaign Financing			May Be	
23				28				Trust Fund Contribution	Ц	Added	to Fees	
Zip	- -			Zip Country			4	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24 25 Surrent			29					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
9. Name and Address of Current Registered Agent							Name	10, Italie and Address of New Negr	Blered A	gent		
MANNE, ROBERT J							Name					
3111 STIRLING RD. FT LAUDERDALE FL 33312							Street Addi	Address (P.O. Box Number is Not Acceptable)				
						83						
						84	City		FL	85 Zip (Code	
44 Dureusett	o the provisions	of Sections 607.05	O2 and 6	enz 1508 Florid	a Statutos the		e named corr	poration submits this statement for the pur		changing if	te registered	
office or re agent. I ar	e giste red agent, m fa miliar with, a	or both, in the Stat and accept the obli	e of Flori gations c	ida. Such chang of, Section 607.0	ge was authoriza 505, Florida Sta	ed by	y the corporat s.	tion's board of directors. I hereby accept	the appo	intment as	registered	
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable (NOTE							ent signature requii	red when reinstating)	DATE	DIDEATOR	20 114 40	
12. TITLE	PTO	OFFICERS AF	AD DIRE	DEL	13.	TITLE		ADDITIONS/CHANGES TO OFFICE	RS AND	Change	Addition	
NAME	POLIAKOFF	GARY A			· ·				'	Onlings	ROOMO!!	
STREET ADDRESS 3111 STIRLING RD.				1.2 NAME 1.3 STREET ADDRESS			. 1000000					
	FT LAUDER											
CITY-ST-ZIP TITLE	VD	DIALC I C		☐ DEL		IITLE	ST-ZIP			Change	Addition	
NAME	BECKER, A	AN S				NAME			'	and a second		
STREET ADDRESS	3111 STIRL						I ADDRESS				}	
CITY-ST-ZIP FT LAUDERDALE FL				2.4 City								
TITLE	SD			DEL		TITLE	01.74			Change	Addition	
NAME	MANNE, RO	BERT. J				NAME			,		_	
STREET ADDRESS	3111 STIRL						ADDRESS				[
CITY-ST-ZIP	FT LAUDER						ST-ZIP					
TITLE				DEL		ITLE	En			Change	Addition	
NAME				_		NAME			,	-		
STREET ADDRESS							ADDRESS				}	
CITY-ST-ZIP							ST-ZIP					
TITLE				☐ DEL		ITLE		and the second state of the second		Change	Addition	
NAME					5.21	NAME						
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP							ST-ZIP					
TITLE				☐ DEL		ITLE				Change	Addition	
NAME						IAME				-		
STREET ADDRESS	•						ADDRESS					
CITY OF 7ID						NYV C					-	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules, 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 a a Nachment with an address.

:R2E034 (10/97)