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

**CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

DRS. SNYDER AND STONE, P.A.

**FILED** Apr 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address 4410 SHERIDAN ST 4410 SHERIDAN ST HOLLYWOOD FL 33021 HOLLYWOOD FL 33021

						3. Date Incorporated or Qualified 06/14/1971				
2. Principal Pla	ce of Business	2a. Mailing Addres	2a. Mailing Address			4. FEI Number	Applied For			
1		26	26			59-1350878	Not Applicable			
Suite, Apt. #, etc.		Suite, Ap1. #, e	Suite, Ap1. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	n '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country 25	Zip <b>29</b>	29 30		,	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	it year Intangible Yes			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
SCHWARTZ, JOSEPH L					Name	Name				
4040 SHERIDAN ST HOLLYWOOD FL 33021				82	Street Addre	ress (P.O. Box Number is Not Acceptable)				
				63						
				84	City	<b>2</b> 1	85 Zip Code			

11 Pursuant to the provisions of Sections 607 0502 and 607 1509 Elevido Statutos

office or re agent. I a	egistored agent, or both, in the State of Florida. Such cha m familiar with, and accept the obligations of, Section 60'	ange was aut 7.0505, Floric	horized by the corporate Statutes.	ation's board of directors.	I hereby accept the ap	pointment as	registered
SIGNATURE	Signature, typed or profind name of registered agent and little if anelicable						
12.	OFFICERS AND DIRECTORS	(NOTE: H	legislered Ageni signature requ		DATE		
TITLE	P DELE		13.	ADDITIONS/CHAP	IGES TO OFFICERS AN		
	<del>-</del>	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	SNYDER, HERBERT A.		1.2 NAME				
STREET ADDRESS	4410 SHERIDAN ST.		1.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP				
TITLE	<del></del>	DELETE	2.1 TITLE			Change	Addition
NAME	stone, Ira e.		2.2 NAME				
STREET ADDRESS	4410 SHERIDAN ST.		2 3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY-ST-ZIP				
TITLE		DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CHTY - ST - ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualindicated on this annual report or supplemental annual report is true and/officer or director of the corporation or the received or triplee empowered Block 12 or Block 13 if changed, or on an attachment if in an address. y for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: