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 #

F53522

(1)

APPROVED HEALTH AND LIFE SERVICES OF FLORIDA, IN

Principal Place	of Business	Mailing Address				
3332 GRIFFIN ROAD 3332 GRIFFIN ROAD						
APARTMENT #106 FORT LAUDERDALE FL 33331-5519 US		FORT LAUDERDALE FL 33312-519 US				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
••		••				11/12/1981
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21 3332	Griffin Road	26 3332 Gri	ff.	in F	5sos	59-2147111 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		****	*****	5. Certificate of Status Desired \$8.75 Additional
22		27			,	Fee Required
City & State	auderdale, FL	Cily & State Ft Lauderdale, FL			ET I	6. Election Campaign Financing \$5.00 May Be
20		Z _{IP} Ft Lauge		Country		Trust Fund Contribution Added to Fees
Zip	Country		\vdash	•		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24 _333]	2 25 USA 9. Name and Address of Curren	29 33312	30	usi	4	10. Name and Address of New Registered Agent
DIAMOND, BENJAMIN ALAN				81	Name	
	2 GRIFFIN ROAD			00	Chrost Ad	ddiseas (D.O. Day Nillymbay is Not Accomtable)
	RT LAUDERDALE FL 33362-5519			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
				63		
				84	Chu	85 Zip Code
					City	FL ~
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the about					e-named co	orporation submits this statement for the purpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 107.0505, Florida Statutes.						
SIGNATURE						
	Signatura imped or printed name of registered agei				ent signature rec	quired when reinstaling) DATE
12.	OFFICERS AND	D DIRECTORS DELETE		13. 1.1 TITLE	г	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **RESIDENT** Addition**
TITLE	DIAMOND, BENJAMIN A.	C Detert		.2 NAME	'	fRESIDENT ☑ Change ☐ Addition
NAME OTREET ADDRESS	3332 GRIFFIN ROAD				ADDRESS	
STREET ADDRESS	FORT LAUDERDALE FL 19					
CITY-ST-ZIP TITLE	P	DELETE.		I.4 CITY-S P.1 TITLE	1-214	Change Addition
NAME	SAFFER, EDWARD A.	—		2 NAME		 · -
STREET ADDRESS	3332 GRIFFIN ROAD	•			ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 19		2	. 4 CITY-1	ST-ZIP	
TITLE		DELE te	_	.1 TITLE		Change Addition
NAME			3	I.2 NAME		
STREET ADDRESS			3	I.3 STREET	ADDRESS	
CITY-ST-ZIP			3	1.4. CITY - S	ST-ZIP	
TITLE		☐ DELETE	4	I.1 TITLE		Change Addition
NAME			4	I. 2 NAME		•
STREET ADDRESS			4	I.3 STREET	ADORESS	
CITY-ST-ZIP			4	I.4 CITY - S	T-ZIP	
TITLE		☐ DELETE		i.1 TITLE		☐ Change ☐ Addition
NAME				.2 NAME		
STREET ADDRESS				.3 STREET		
CITY-ST-ZIP			_	.4 CITY - S	T-ZIP	
TITLE		☐ DELETE		i.1 TITLE	-	Change Addition
NAME				i.2 NAME		
STREET ADDRESS			6	3 STREET	ADDRESS	

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.

6.4 CITY-\$1-ZIP

FILED

Jan 29 1998 8:00am

Secretary of State

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