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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(5)

SEMINOLE ECONOMIC DEVELOPMENT, INC.

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					I INGELLE ADER IDELL BERIR INDER EILE	OTTO BURN BADA BADA BABA GADA BADA ABBA
8300 STIRLING ROAD % JIM SHORE HOLLYWOOD FL 33024 US		6300 STIRLING ROAD % JIM SHORE HOLLYWOOD FL 33024 US		DO NOT WRIT	E IN THIS SPACE	
		••			04/02/1984	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2642712	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e 	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has p	aid the current year Intangible
24	25		30		Personal Property Tax due Jun	
9, Name and Address of Current Registered Agent 10. Name and Address of New Regis DORSKY FRIC. 81 Name						egistered Agent
DORSKY, ERIC 4430 SW 64 AVE.			L			
DAVIE FL 33314			1	Street	Address (P.O. Box Number is Not Accepta	ble)
]			ŧ	13		
				4 City		OF Zin Code
			i			FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named office or registered agent, or both, in the State of Ftorida. Such change was authorized by the corpagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered opt the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered as			gent signature	required when reinstating)	DATE
12.	PID	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFI	· · · · · · · · · · · · · · · · · · ·
NAME	SHORE, JIM	vecent	1.2 NAM			☐ Change ☐ Addition
STREET ADDRESS	6300 STIRLING ROAD			ET ADDRESS		[3
CITY-ST-ZIP	HOLLYWOOD FL			-ST-ZIP		
TITLE	VSD	DELETE	2.1 TITL	- 1		Change Addition
NAME			2.2 NAM	E		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY	-ST-ZIP		
TITLE	D	☐ DELET E	3.1 TiTLI			Change Addition
NAME	OSCEOLA, MAX		3.2 NAM	E		1
STREET ADDRESS			3.3 STR€	E1 ADDRESS		İ
CITY-ST-ZIP	HOLLYWOOD FL			'- ST - 7IP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME OTREET APPRESS			4.2 NAM	-		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE	-	DELETE	4.4 City 5.1 TITLS			Change Addition
NAME		- Drafte	5.2 NAM			Change C Adodlori
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	1		
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME		1 1	6.2 NAM	Ī		Onsingo ndordon
STREET ADDRESS		1// //	B	ET ADDRESS		
CITY-ST-ZIP		1/ <i>1</i> /2	6.4 CiTY			
4.0	Therefore the transfer to the transfer to	181.0		L		

fing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in twith an address. I neterly certify that the information suppli-indicated on this annual report or supplier officer or director of the corporation/or tife Block 12 or Block 13 if changed, or opport