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 # L55030

1830 INVESTMENTS, INC.

(5)

FILED Feb 27 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address 1222 NE 4TH AVENUE				W)		
1222 NE 4TH	AVENUE	1222 NE 4TH AVENUE							
215 FORT LAUDERDALE FL 33304-1925			FORT LAUDERDALE FL 33304-1925			DO NOT WRITE IN THIS SPACE			
US		US	US		3. Date Incorporated or Qualified 03/06/1990				
2. Principal P	ace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·			4. FEI Number	ł	Applied For	
21		26				65-0178904	Not Applicable		
Suite, Apt	#, etc.	Suite, Apt. #, etc.					\$8.	75 Additional	
22		27				5. Certificate of Status Desired	Fe	e Required	
City & State	(1	City & State				6. Election Campaign Financing	\$5.	.00 May Be	
23		28				Trust Fund Contribution Added to Fees			
Ζιρ	Country	Zip	<u> </u>			8. This corporation owes or has paid the current year Intangible			
24	25	[29]	30			Personal Property Tax due June 30.	∐ Yes	M-No	
1 41	9. Name and Address of Curre	nt negistered Agent		81	Name	10. Name and Address of New Registers	a Agent		
	BOSSIERE, MARC P			"	Name				
215	22 NE 4TH AVENUE			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	rt lauderdale fl 33304			B3					
"	NI LAUDENDALE PL 33304								
				B4	City	F	L 85	Zip Code	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	tutes, the al	oove	named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the a	of changi	ng its registered	
agent. I a	m familiar with, and accept the oblig	gatio is of, Section 607.0505,	Florida Stat	utes.	· ine corporati	on's board or directors. I hereby accept the a	ppointmer	it as registered	
SIGNATURE	Signature, lyped or printed hanso of registered as	oent and teacht ambeataine. (A	IOIL Registere	d Ager	nt sionalure require	ed when reinstating) DATE		· · · · · · · · · · · · · · · · · · ·	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12	
TITLE	В	☐ DELETE	1.1 Ti	TLE			Cha	nge 🔲 Addition	
NAME	Salzani, Alfredo		1.2 N/	AME					
STREET ADDRESS	2429 RALAIGH ST.		1.3 ST	REET A	ADDRESS				
CITY+ST-ZIP	HOLLYWOOD FL 33020		1.4 CI	TY-ST	r-ZIP				
TITLE	D	☐ DELETE	21 TI	TLE			Cha	nge Addition	
NAME	SALZANI, MICHAEL		22 N	AME					
STREET ADDRESS	2429 RALAIGH ST.		2 3 51	2 3 STREET ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL 33020		2.40	ITY-S	T-ZIP				
THTLE		☐ DELETE	3 1 TI	TLF		· ————	☐ Cha	nge 🔲 Addition	
NAME			3.2 N/	AME]				
STREET ADDRESS			3.3 \$1	REET A	ADDRESS				
CITY-ST-ZIP			3 4. C		T-ZIP	· · · · · · · · · · · · · · · · · · ·		·	
TITLE		☐ DELETE	4.1 Ti		[L Cha	nge [_] Addition	
NAME			4 2 N	AME					
STREET ADDRESS			4.3 S1	REET	ADDRESS				
CITY-ST-ZIP		- I hever		TY-ST	I-ZIP		F7 4		
TITLE		☐ DELETE	5.1 TE				☐ Cha	nge Addition	
NAME			5.2 N						
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP		DELCES.	5.4 CI		r-ZIP		[7.6]		
TITLE		☐ DELETE	6.1 Ti				☐ Cha	nge 🔲 Addition	
NAME			62 N/						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	THE About the Indian	man and kin a state that the	6.4 0			Cooling 110 07/0Vi) Florida Otalidas 17, 41		taba tafa	
. 14. I DOFODY C	erury inacine intormation supplied i	with this filled does not qualify	v ior the axé	:moi	ion stated in :	Section 119.07(3)(i), Florida Statutes, I further	cerury tha	TOMANION BITT	

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 all alcohornt with an address.

ALFRID SALZANI