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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

1040 HADDISON OF STE 202



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M56671

CUERVO & PARKS, P.A.

(4)

Mailing Address

4040 HADDICON OT

## FILED Apr 07 1998 8:00am Secretary of State



HOLLYWOOD FL 33020			HOLLYWOOD FL 33020							
						DO NOT WRITE IN THIS SPACE				
							<ol> <li>Date Incorporated or Qualified 08/04/1987</li> </ol>	<del></del>		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		TA	pplied For
21			26				65-0003754			ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.							Additional
22			7				5. Certificate of Status Desired	ш		equired
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be
23			В				Trust Fund Contribution			to Fees
j ZiP	<b>—</b>	untry	Zip 1	` <del> </del>			8. This corporation owes or has paid the current year Intangible			
24	25   29   9. Name and Address of Current Registered			30			Personal Property Tax due June 30. Yes No			
	daress of Current Heg	istered Agent		10. Name and Address of New Registered Agent				gent		
PA		ľ	or Name							
19- HC		8:	2	Street Addre	ess (P.O. Box Number is Not Acceptat	ole)				
				63	3					
				84	3 1	City		FL	<b>85</b> Zip	Code
11. Pursuant	to the provisions of	Sections 607.0502 and	607.1508, Florida Statu	tes, the above	ve-r	named corp	poration submits this statement for the p	uroose of	hanging i	ts 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 607.0505, Florida Statutes.										
SIGNATURE _										
	Signature, typed or printed	name of registered agent and ti		TE. Registered A	geni	signature require	ed when reinstating)	DATE		
12.	DP	OFFICERS AND DIRE		13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	PARKS, STEV	EM M	☐ DELETE	1.1 TITLE 1.2 NAME				L	Change	Addition
NAME			TE 200							İ
STREET ADDRESS 1940 HARRISON STREET, S HOLLYWOOD FL					1.3 STREET ADDRESS					
CITY-ST-ZiP	DVP	16	DELETE	1.4 CITY -	S1-7	ZIP		-	<b>-</b>	
TITLE	CUERVO, DIA	NA D	☐ OCIETE	2.1 TITLE				ι	Change	Addition
NAME		ON STREET, SUITE 3	າດວ	2.2 NAME	TREET ADDRESS					
STREET ADDRESS	HOLLYWOOD		102							
CITY-ST-ZIP TITLE	110000	1 5 00050	DELETE	2.4 CHY-	· S1 -	ZIP		r	7.	4 4 4 10 2
NAME				3.1 TITLE				L	Change	☐ Addition
STREET ADDRESS				3.2 NAME		Noron				i
				3.3 STREE						
CHY-ST-ZIP TITLE			DELETE	3.4. CITY- 4.1 TITLE	31-	ZII'			Change	Addition
NAME			La becce	4. 2 NAME				_		Addition
STREET ADDRESS				•		2001.00				ļ
CITY-ST-ZIP				4.3 STREE						
TITLE			DELETE	4.4 CITY - 5.1 TITLE	51-7	ZPP			Change	Addition
NAME				5.2 NAME				L	- cuange	C VORKINII
STREET ADDRESS				5.3 STREE	T #ቦ፡	DOLCO				
CITY-ST-ZIP										
TIFLE			DELETE	5.4 City- 6.1 Title	51 - Z	SP		.,	Change	Addition
NAME			occert	6.2 NAME				L	_ онанув	L Audition
STREET ADDRESS				6.3 STREET ADDRESS						
STREET PURESS				6.3 STREE	LAD	URESS				

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.