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

P93000047687 (7) DOCUMENT

alack Tuster

Apr 14 1998 8:00am Secretary of State

FILED

ROBERT W. ZUCKER, C.P.A., P.A.				1 (AB(108) 218 (B(0) 1111 (BE)); BE(1) 48(1) 48(1)	B1841 18 B18 B1181 18111 (BB1 18B1
Principal Plac	ee of Business	Mailing Address			0 (DE 10 0 (D DE 10 D 10 D 10 D
4842 WILLOW DR.		4842 WILLOW DR.			
BOCA RATON FL 33487		BOCA RATON FL 33487		DO NOT WOLF IN T	110 0D 10E
US		U\$		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified 07/01/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0420449	Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		a. Certificate of Status Desireo	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country		Ztp Country		Trust Fund Contribution	Added to Fees
24	25	29	30	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible K Yes No
[24]	9. Name and Address of Cur		[30]	10. Name and Address of New Register	
ZUCKER, ROBERT W 81			81 Name		
4842 WILLOW DRIVE			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33487			oli cat Ad	dress (F.O. Box Marrison to Not Proception)	
			83		
			84 City		. 85 Zip Code
					L 85 Zip Code
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 register 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 registere					
agent. i a	nm familiar with, and accept the ob	figations of, Section 607.0505, Flo	orida Statutes.		
SIGNATURE	Signature typed or printed numberal in gestered	agent and title diagolicable (NOT	H: Registered Agent signature req	puired when reinstating) DAT	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS /	
TITLE	P	DELETE	1.1 ¥OLE		Change Addition
NAME	ZUCKER, ROBERT W		1.2 NAME		
STREET ADDRESS	4842 WILLOW DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL	T protect	1.4 CITY-S1-ZIP		Obassa D Addition
TITLE	ST ZUCKER, R	☐ DELETË	2.1 TITLE		Change Addition
NAME	4842 WILLOW DR.		2.2 NAME		
STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL		2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 HILE		Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ŀ
CITY-\$1-ZIP			3.4. CITY-ST-ZiP		
TITLE		☐ DELETË	4.1 THLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE NAME		□"] NUTCUE	5.1 TITLE 5.2 NAME		Smarrys Mountion
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-S1-ZIP		
TiTLE	<u></u>	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - Z IP		

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 agdress Alma Rich