## 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 # 1. Corporation Name P94000088754 (4)

117 SOUTH DIXIE HIG	iHWAY, INC.					
Principal Place of Business	Mailing Address		DO NOT WRITE IN THIS SPACE			
117 SO. DIXIE HIGHWAY LAKE WORTH FL 33460	117 SO. DIXIE HIGHY LAKE WORTH FL 334					
			Date Incorporated or Qualified 12/07/1994			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number			
21	26		65-0544691			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.		
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5 Ac		
Zip Cou	untry Zip	Country	8. This corporation owes or has paid the cu	rrent ye		

## **FILED** Apr 02 1998 8:00am Secretary of State



Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

			<del></del>	·						
Zip	Coun	lry	Zip	<u> </u>	_ Country	'	'	tion owes or has paid the o		
24	25		29	30	<u>)                                    </u>			perty Tax due June 30.		No
	9. Name and Addr	ess of Current	Registered Agent	<u> </u>			10. Name and A	ddress of New Registere	d Agent	
YO	IUNG, RONALD E				81	Name				
184	60 FOREST HILL BL	VD. STE. 105			82	Street	Address (P.O. Box Num	ber is Not Acceptable)		7,
WE	WEST PALM BEACH FL 33406									
					83					
					84	City			lor l Zim	Code
					07	City		F	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 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 nar	to all registered to an	and the if anyloophia	(MOTE 6	agialarad Ass	-1	required when reinstating)	DATE		
12.		OFFICERS AND		(NOTE: H	13.	int signature	_ <u></u>	HANGES TO OFFICERS A	NO DIRECTOR	PC IN 10
TITLE	D	BITTOLITO AND		DELETE	1.1 TITLE		ADDITIONS/C	MANGES TO OFFICENS A	Change	Addition
NAME	ZMISTOWSKI, JO	NEI		*****	1.2 NAME	ļ			L ondingo	
STREET ADDRESS	117 SO. DIXIE H				1.3 STREET	Annates				
	LAKE WORTH FL									
CITY-ST-ZIP TITLE	n	. 33400		DELETE	1.4 CITY - S 2.1 TITLE	1-ZIP		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	LIKBLANC, DENIS	<u>.</u>	_		2.2 NAME	İ			onling	
STREET ADDRESS	117 SO. DIXIE H				2.3 STREET	ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL	*			2.33 INC.					
THLE	DAIL HOMETE	. 00400	ГТ	DELETE	31 TIFLE	51 - Z(P			Change	Addition
NAME					3.2 NAME		i			
STREET ADDRESS					3 3 STREET	ADDRESS				
CITY-ST-ZIP					3.4. CITY-S					ĺ
TITLE		<del></del>		DELETE	4.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<del></del>	Change	Addition
NAME					4. 2 NAME					_
STREET ADDRESS					4.3 STREET	ADDRESS				ľ
CITY-ST-ZIP					4.4 CITY-S					
TITLE				DELETE	5.1 TITLE	1-211			Change	Addition
NAME			_		5.2 NAME	1				
STREET ADDRESS					5.3 STREET	ADDRESS				
CITY-ST-ZIP					54 CITY-S	1				
TITLE				DELETE	6.1 TITLE	1-215			Change	Addition
NAME					6.2 NAME					
STREET ADDRESS					6.3 STREET	VDDBE 66				
CITY-ST-ZIP					6.4 CITY - S					
14. Thereby o	certify that the informati	on supplied with	this filing does no	ot qualify for the	ne exemp	tion state	d in Section 119,07(3)(i)	, Florida Statutes. I further	certify that the	information
indicated	on this annual report o	y⊷upplemental a	annual report is tru	ie and accura	ite and tha	at my sigi	nature shall have the sai	me legal effect as if made of 7, Florida Statutes; and that	under oath; tha	nt!am an ∣

276/98