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 # P95000030220 (4)

FILED Mar 17 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					
SUITE 110 BOCA RATON FL 33487 BOCA RATON FL 33487 DO NOT WRITE IN THIS SPACE	Principal Place of Business	Mailing Address		I CANDINDAL LIGA SACIES ACTUS MARIES ANTICO	IIAN AGAM MAM MAM MAM EBIN MAM
BOCA RATON FL 33487 BOCA RATON FL 33487 DO NOT WRITE IN THIS SPACE	1801 CLINT MOORE ROAD 1801 CLINT MOORE ROAD				
3. Date Incorporated or Qualified 04/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0577766 Not Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State 28 Country Zip Country Zip Country Zip Country S. Date Incorporated or Qualified 04/18/1995 4. FEI Number 65-0577766 Not Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Fee Required Fee Required Added to Fees Added to Fees Added to Fees Added to Fees Personal Property Tax due June 30. Yes No	SUITE 110 SUITE 110			DO NOT IMPLIE IN THE	00105
City & State Country Zip Z	BOCA RATON FL 33487 BOCA RATON FL 33487				SPACE
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Appli				•	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite,	2. Principal Place of Business	2a. Mailing Address			Applied For
Suite, Apt. #, etc. Suite, Ap	21	26		65-0577766	Not Applicable
City & State City & Country Co	Suite, Apt. #, etc. Suite, Apt. #, etc.		•	5 Certificate of Status Desired	+ · · · · · · · · · · · · · · · ·
23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes No			******	or continues of clause beautics	
Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes No	— '	├ ──			
24 25 29 30 Personal Property Tax due June 30. No			Country		
		_ 	- 7 '		
			1		
PRONK, NICO 81 Name					
1904 CLINT MOODE DOAD	1801 CLINT MOORE ROAD		90 Ctroot Addr	CO (D.C. Day Number in Net Acceptable)	
	SUITE 110		62 Street Addre	ess (F.O. Box Number is Not Acceptable)	
BOCA RATON FL 33487			83		
•	•		94 Cib.		ar Zin Codo
L. B5 Zip Code	l _a		Gity City	FI	_ ba 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	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpo				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. If hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig 	e of Florida. Such change was aut pations of, Section 607.0505, Flori	thorized by the corporati da Statutes.	ion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	,				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	Signature, typed or printed name of registered ag-				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		·		ADDITIONS/CHANGES TO OFFICERS AN	
BOOKH/ MOO	,	□ DELETE	l i		Change Addition
4440 OW OACT AVE	AAAA CAN AACT AME				
MONA DATON FL 20400	BOOK DATON EL 00400]
	***************************************	T nevere			Change Addition
LIAMET MANAGE	,	ריי) מנינכונ			Change C Addition
CARACT MADDELLA CODOLE	AARAF MADDELLA OIDOLE				
BOOA DATON CL 00400	DOCA DATON CL 00400				
		DELETE			Change Addition
NAME CAMPBELL, DWIGHT 3.2 NAME	,	Lad Decer			
STREET ADDRESS 5020 N.W. 105TH DR. 3.3 STREET ADDRESS	FOOD NINE ADETH DO				t
CITY-ST-ZIP CORAL SPRINGS FL 33062	CODAL CODINCE EL 22000				
		DELETE			Change Addition
NAME 4. 2 NAME		being			
STREET ADDRESS 4.3 STREET ADDRESS					
CITY-ST-ZIP 4.4 CITY-ST-ZIP					
TITLE DELETE 5.1 TITLE Change Addition		DELETE			Change Addition
NAME 40002459804	1	_		4000024598	Q4
STREET ADDRESS -03/17/9801076012				-03/17/98010760	12
NAME \$1 NAM				***150 . 00	
		☐ DELETE			
NAME 6.2 NAME	NAME		B 1		
STREET ADDRESS 6.3 STREET ADDRESS	STREET ADDRESS		6.3 STREET ADDRESS	~ (?) m/(1
CITY-ST-ZIP 6.4 CITY-ST-ZIP	CITY-SI-ZIP			<i>\</i>	<i></i>

14. Thereby 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 attainment with an address.

3/20/5