

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

**FILED**  
**Jan 09 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000068782 (8)**  
 1. Corporation Name  
**D.P.I. OF CORAL SPRINGS, INC.**



Principal Place of Business <b>5307 NW 118 AVE                  CORAL SPRINGS FL 33076                  US</b>	Mailing Address <b>5307 NW 118 AVE.                  CORAL SPRINGS FL 33076                  US</b>
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DO NOT WRITE IN THIS SPACE

<b>2.</b> Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	<b>2a.</b> Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	<b>3.</b> Date Incorporated or Qualified <b>09/05/1995</b> <b>4.</b> FEI Number <b>65-0605350</b> Applied For <input type="checkbox"/> Not Applicable <b>5.</b> Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> <b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> <b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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<b>9. Name and Address of Current Registered Agent</b> <b>SCHWARTZ, ROY</b> <b>5307 NW 118 AVE.</b> <b>CORAL SPRINGS FL 33076</b>	<b>10. Name and Address of New Registered Agent</b> 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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: *Roy Schwartz* (Signature) *Roy Schwartz* (Printed Name) *1/2/98* (Date)

**12. OFFICERS AND DIRECTORS**

TITLE	D	DELETED	
NAME	SCHWARTZ, ROY		
STREET ADDRESS	5307 NW 118 AVE.		
CITY-ST-ZIP	CORAL SPRINGS FL		
TITLE		DELETED	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		DELETED	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		DELETED	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE		Change	Addition
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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.

SIGNATURE: *Roy Schwartz* (Signature) **ROY SCHWARTZ** (Printed Name) *1/2/98* (Date) **954-796-1587**

CR2E034 (10/97)