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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P95000073446 (3)

J. RANDY HOUGH, CPA, P.A.

SUITE 200	BEACH LAKES BLVD.	Mailing Address 2001 PALM BEACH LAK SUITE 200	- · - · · ·		19659 Dilli 91911 B1010 QIII 1001
W PALM BEACH FL 33409 W PALM BEACH FL 33409				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 09/21/1995	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0624417	Not Applicable
Suite, Apt. 22	ite 409	Suite, Apt. #, etc.,	409	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e T	City & State		Election Campaign Financing	\$5.00 May Be
23		28	,	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25]	29	30	_	Yes No
ļ	 Name and Address of Currer DUGH, J. RANDY 	it Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
SU	01 PALM BEACH LAKES BLVD HTE 200 EST PALM BEACH FL 33409		83 Suit 84 City	dress (P.O. Box Number is Not Acceptable)	85 Zip Code
office or r	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such chan ge w as ations of, Section 607.0505, Fl	authorized by the coroors	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered
12,	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS CITY - ST - ZIP	HOUGH, J R % 2001 PALM BEACH LAKES W PALM BEACH FL 33409	S BLVD. SUITE 200	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	001 Palm Beach Lakes Blud	. Svite 409
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		ļ
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		□ DELÉTE	3.4. CITY - ST - 7(P 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
14L/MIT			4. £ DANAL		

CITY-ST-ZIP

14. I horeby 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 in an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY - ST- ZIP

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

51 TITLE

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

CITY-S1-ZIP

TITLE

Karoly ff -+

3/17/18

561-686-2152

☐ Change

Change

Addition

Addition

32E034 (10/97)

FILED

Apr 02 1998 8:00am

Secretary of State