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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 05 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #
1. Corporation Name

P96000004364 (1)

CHARLES WENDER, ATTORNEY AT LAW, CHARTERED

	_		.,,									
Principal Place of Business			Mailing Address							il Ab ill Ab ill		INN ALDI KADI
190 W. PALMETTO PARK ROAD BOCA RATON FL 33432			190 W. PALMETTO PARK ROAD BOCA RATON FL 33432									
								DO NOT WRITE IN THIS SPACE				
									3. Date Incorporated or Qualified			
2. Principal P	Ologo of Dunie	1000	Do Mail	ina Addresa					01/12/1996			0 F
· c/	AME	1 0 \$5	2a. Mailing Address SAME					4, FEI Number		—	pplied For	
Suite, Apt.	# Alc		Suite, Apt. #, etc.					6 5-0633436			lot Applicable Additional	
22	. #, 010.		27					5. Certificate of Status Desired		+	Additional leguired	
City & Stat	te		City & State					6. Election Campaign Financing			May Be	
23			28					Trust Fund Contribution			to Fees	
Zip		Country	Zip		Cou	intry			8. This corporation owes or has pai			
24		25	29 30						Personal Property Tax due June 30. X Yes No			
	9. Name	and Address of Curren	t Registered	Agent					10. Name and Address of New Reg	lstered A	gent	
WE	ENDER, CH	ARIFS				B1	Name					
190 W. PALMETTO PARK ROAD						82 Street Address (P.O. Box Number is Not Acceptable)						
	CA RATON					Street Address (1.0. Dox Namber to Not Accept			,			
-						83						
						04	City				loc 7:-	Carlo
						84	City			FL	85 Zip	Code
office or I	registered ag	ions of Sections 607.050 ent, or both, in the State th, and accept the obliga	of Florida, St	uch change was	authorized	d by	the corp	corpo oratio	ration submits this statement for the pin's board of directors. I hereby accep	urpose of t the appo	changing intment as	its registered s registered
SIGNATURE												
Signature, typed or printed name of registered agent and little if applicable (NOTE:						registered Agent signature required			when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DIDECTO	DO IN 10
12.	D	OFFICERS AN	DIRECTOR	DELETE	13.	TI E		TID		ENS AIND	Change	Addition
NAME		CHADIES		- Orecie			}	-	SECRETARY			
NAME WENDER, CHARLES STREET ADDRESS 190 W. PALMETTO PARK RO			iAD						NDA L. MAZZA			
	1	ATON FL 33432	40		4				W. PALMETTO PARK RO	JAD		
CITY-ST-ZIP TITLE	BOUAR	ATON FL 33432		DELETE	1.4 Ci		1-212	BOC	CA RATON, FL 33432		Change	Addition
NAME)				2.2 NA		Ì			'		
STREET ADDRESS							ADDRESS					
	İ				2.40							
CITY-ST-ZIP TITLE				DELETE	3.1 TI		11-211				Change	Addition
NAME					3.2 NA					•	_ •	
STREET ADDRESS	}				1		address					
CITY-ST-ZIP					3.4. C							
TITLE				DELETE	4.1 10		, 2.,				Change	Addition
NAME					4. 2 N	AME					-	
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					4.4 CI		1					
TITLE				DELETE	5.1 TIT		·····				Change	Addition
NAME					5.2 NA							
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					5.4 CI		- 1					
TITLE	-			DELETE	6.1 TIT					I	Change	Addition
NAME					6.2 NA	ME	}					
STREET ADDRESS					6.3 ST	REET A	ADDRESS					

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 autochment with an address.