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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000035959 (1) DOCUMENT #

KRAMER, GREEN, KAHN & KUSHNER, P.A.

FILED Apr 09 1998 8:00am Secretary of State



					an 1/20
Principal Plac	e of Business	Mailing Address			
4000 HOLLYWOOD BLVD. STE 485 SOUTH 4000 HOLLYWOOD BLVD. HOLLYWOOD FL 33021). STE 485 SOUTH	DO PROT MIGHTO IN TAING GOAGE	
				DO NOT WRITE IN 1	MIS SPACE
				04/25/1996	
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-066 1909	Not Applicable
Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22 Suite 435 . S 27 Suite 4 City & State City & State		27 Suite 435	<u> </u>		Fee Required
				6. Election Campaign Financing	\$5.00 May Be
Zip	Country		Country	Trust Fund Contribution	Added to Fees
24	25	<u>⊢</u> '	30	8. This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
24]	9. Name and Address of Curre		30	10. Name and Address of New Registe	
KDAMED DORECT M					
AND MAIL PRINCED BLUE OFF ARE COUNTY					
					435 5.
83)					
			84 City	OLLY WOOD	FL 85 Zip Code 3302/
1. 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. I					
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.					
1 (11) 196					
Signature, typical or printed name of regressored agoni and trillo if applicable (NOTE Registered Agent signature required when reinstating) [DATE					
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D NOTHER PORTOT II	X I DELETE	1.1 TITLE		Change Addition
NAME	KRAMER, ROBERT M	TE AND COURT	1.2 NAME		
STREET ADDRESS	4000 HOLLYWOOD BLVD. S HOLLYWOOD FL 33021	1E 480 SOUTH	1.3 \$TREET ADDRESS		
CITY-ST-ZIP	D D D	N/ Otrese	1,4 C(1Y - \$1 - Z(P		
TITLE	•	DELFTE	2.1 TITLE		Change Addition {
NAME	GREEN, MITCHELL F 4000 HOLLYWOOD BLVD. STE 485 SOUTH		2.2 NAME		
STREET ADDRESS	HOLLYWOOD FL 33021	116 400 300111	2 3 STREET ADDRESS		
CiTY-ST-ZIP	110111100011 33021	DELETE	2.4 CITY - ST - ZIP	President, Discotur	Change A Addition
TITLE		Outtit	3.1 TITLE	Les Kosnner	Change Addition
NAME			3.2 NAME	4000 Hollywood Blud. suite 4?	হ ৪
STREET ADDRESS			3 3 STREET ADDRESS	Holywood, FL 33021	-
CITY-ST-ZIP TITLE		DILETE	3.4. CITY - ST - ZIP 4.1 TITLE	1100000011C 330%	Change Addition
NAME		₽ Milli	4. 2 NAME		L_1 Change L_1 Addition
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Chang Addition
NAME			5.2 NAME	<i>,</i>	1/-1/1-
STREET ADDRESS			5.3 STREET ADDRESS	///	7419
CITY-ST-ZIP			5.4 CITY-ST-ZIP	\mathcal{M}	/
TITLE		☐ DELETE	61 TITLE	100002484	Change Addition
NAME		-	6.2 NAME	-04/09/9801061	-032
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY-S1 - 7IP		
0111*31*AF		51 111 0 C	040011-011711	() () () () () () () () () ()	

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.

Les KLONLIND

President

1/1/92

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