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 #

P96000094721 (3)

TAUB & TAUB, P.A.

FILED Mar 31 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			140 014804 110 10418 01111 90711 04111 08415 00110 1	TOTA BLOTA LOGIN 1980	ji 11 31 103 1
7777 GLADES ROAD 7777 GLADES ROAD SUITE 313 SUITE 313 BOCA RATON FL 33432 BOCA RATON FL 33432					DO NOT WRITE IN THI	S SPACE	
ŀ					11/15/1996		
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	I Ap	plied For
21 26					65-0723075	—	t Applicable
Suite, Apt. #, etc. Suite. Apt. #, etc. 22 27					5. Certificate of Status Desired	\$8.75 A Fee Re	
		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip ~	Country	Zip	Countr	у	8. This corporation owes or has paid the c		
24 33	1 5 25		<u> </u>		Personal Property Tax due June 30.		No
	9, Name and Address of Curre	ant Registered Agent	81	Name	10. Name and Address of New Registere	3 Agent	
	UB, RICHARD F		Ĺ				
7777 GLADES ROAD				Street Add	ress (P.O. Box Number is Not Acceptable)		
	ITE 313 ICA RATON FL 33432		83	 		~	
60	UA NATUN FL 33432						
			84	City	F	85 Zig C	زز کر ل
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the above	re-named corp	poration submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or both, in the Stat	e of Florida. Such change was au	thorized b	y the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap-	pointment as r	registered
SIGNATURE	The state of the state of the contract of the	gament of, cooler, cor.,cool, inc.	ou blotole				
SIGNATURE	Signature, typod or printed name of registered a	gent and title if applicable (NOTE:	Registered Ac	jent signature requi	red when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF		
TITLE	PD	☐ DELETE	1.1 TITLE	Į.	· ·	Change	Addition
NAME	TAUB, RICHARD F		1.2 NAME				
STREET ADDRESS	7777 GLADES ROAD			T ADDRESS			i
CITY-ST-ZIP	BOCA RATON FL 33432	DELETE	1.4 CITY-	ST-ZIP		Change	Addition
TOLE	VD	E DECEIE	2.1 TITLE			Change	LT Madition
NAME	TAUB, DENA R 7777 GLADES ROAD		2.2 NAME	* *******			}
STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL 33432			T ADDRESS			
TITLE	BOOK HATON PE 33432	☐ DELETE	2. 4 CITY- 3.1 TITLE	51-ZIP		Change	Addition
NAME			3.2 NAME	}			
STREET ADDRESS				T ADDRESS			ĺ
CITY-ST-ZIP			3 4. CITY-				
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME	:			i
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4,4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CRTY-	ST-ZiP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				ľ
STREET ADDRESS			6.3 STREE	T ADDRESS)
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	<u> </u>		

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 attachment with an address.

SIGNATURE: