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 # P96000102067 (1)

BOCA FONTANA PLAZA, INC.

Principal Pla	ice of Business	Mailing Addi	1055						
3978 PROS	PECT AVE. STE # 11 II BEACH FL 33404	3878 PROSPECT AVE. STE WEST PALM BEACH FL 33404				DO NOT WRITE IN THIS	RITE IN THIS SPACE		
						3. Date Incorporated or Qualified 12/18/1996			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-0736692		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27				6. Certificate of Status Desired		5 Additional Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip 24	Country 25	7 ₁ p	30 Cou	untry	1	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year	Intangible No	
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
TOTH, JOHN 3878 PROSPECT AVE					Name Street Addre	ess (P.O. Box Number Is Not Acceptable)			
SUITE 11					<u> </u>				
į W	EST PALM BEACH FL 33404			83					
				84	City	Ei	85 Z	ip Code	

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 agont, 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 agont, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos.

SIGNATURE						<u> </u>
Signature typod or protect narror of registerest agent and title diapplicable (NOT			gistered Agent signature req		DATE	
12.				ADDITIONS/CHANGES TO OF	RS IN 12	
TITLE		ELETE	1.1 TITLE		Change	Addition
NAME	TOTH, JOHN		1.2 NAME			
STREET ADDRESS	PROSPECT AVE #11		1.3 STREET ADDRESS		•	i
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-ST-ZIP			
TITLE	□ D	ELFTE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			1
STREET ADDRESS			2.3 STREET ADDRESS			! • • • • • • • • • • • • • • • • • • •
CITY-ST-ZIP			2. 4 CITY - ST - ZiP	_	1.6	ļ I
TITLE		ELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			İ
CITY-ST-ZIP			3.4. CITY-ST-ZIP			i
TITLE	DI	ELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4 4 CITY-ST-ZIP			i l
TITLE	□ DI	ELETE	5 1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE	DI DI	ELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

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 13 if changed, or on an attachment with an address.

SIGNATURE:

848-3700

FILED

Feb 12 1998 8:00am

Secretary of State