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

P97000052802 (0) DOCUMENT #

BALDWIN ROSS ASSOCIATES, INC.

FILED Apr 24 1998 8:00am Secretary of State

|--|

944-434-9392

Principal Plac	e of Business	Mailing Address			C Jackings its (atil 166)) poils 66111 apill	P4:61 4:148 11884 12:14 841	168 6585 588.	
10 FAIRWAY DRIVE 10 FAIRWAY DRIVE								
SUITE 113 SUITE 113 DEEFIELD BEACH FL 33431 DEEFIELD BEACH FL 33431				DO NOT WRITE I	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	<u> </u>		
					06/16/1997			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 760576		pplied For	
21 10 Fairway prive 26 10 Pa) runy po Sulte. Apt. #, etc.					65-0760576		ot Applicable	
27 SUIK 113					5. Certificate of Status Desired	1 1 '	Additional equired	
City & State City & State				1 6	6. Election Campaign Financing	\$5.00	May Be	
23 101 (Country Country	28 OLC TRIA	Beu		Trust Fund Contribution		to Fees	
24 B3 4	41 25 USA	29 33441	Coun	ያ ሉ	This corporation owes or has paid Personal Property Tax due June 3		tangible No	
	9. Name and Address of Current		N Y	<u> </u>	10. Name and Address of New Regi		=	
AN	IERILAWYER CHARTERED			Name *	Toller Facisio 60			
34	3 ALMERIA AVENUE		7	2 Street A	ddress (P.O. Box Number is Not Acceptable	a)		
CO	ORAL GABLES FL 33134		_	15/3	o N. Floral Hishw	<u>av</u>		
			[8	Suit	1 300			
			1	Gity (2)		85 Zip	Gode 2 1	
44 D		1 007 1500 Flatel Oct A	45 - 5	1 100	LU PAUTON	FL 3	1450	
office or r	registered agent, or both, in the State (of Florida. Such change was au	thorized	by the corpo	corporation submits this statement for the purion or the purion of the corporation of the	rpose of changing if the appointment as	registered	
-	an familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statu	tes.	(1/1.	2/98		
SIGNATURE	Shature, typod or printed pure of registered agen	and title if applicable (NOTE:	Registered /	Agont signature re	equired when reinstaling)	DATE	İ.	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12	
TITLE	PSTD	DELETE	1.1 T/TL	E		☐ Change	Addition	
NAME	WINTER, DAVID E		1.2 NAM	ie			;	
STREET ADDRESS	10 FAIRWAY DRIVE	in and	1.3 STR	EE1 ADDRESS			ļi	
CITY-ST-ZIP	DELRAY BEACH FL 30402	33441		-ST-ZIP			- 1-1 x 1/20 - 1	
TITLE		DELETE	21 TiTL	\ \ \		L Change	☐ Addition G	
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CITY-ST-ZIP		DELETE	3.1 THTL			Change	☐ Addition	
NAME	=	_	3.2 NAM			•	_	
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STREET ADDRESS			4.3 STR	EET ADDRESS			İ	
CITY-ST-ZIP				- ST- ZIP				
TITLE		DELETE	5.1 TITL	ì		☐ Change	Addition	
NAME			5.2 NAM				-	
STREET ADDRESS				ET ADDRESS			-	
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	5.4 CITY 6.1 TITU	-ST-ZIP		Change	Addition	
NAME		- DELETE	6.2 NAM	- 1		⊏1 cranβe	Addition	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			1	-ST-ZIP			}	
14. I hereby o	certify that the information supplied wit	h this filing does not qualify for	the exen	nption stated	I in Section 119.07(3)(i), Florida Statutes. I fu	irther certify that the	information	
indicated officer or	on this annual report or supplemental director of the corporation or the recei	annual report is true and accur ver or trustee empowered to ex	ate and ecute th	that my signi is report as r	ature shall have the same legal effect as if n required by Chapter 607, Florida Statutes; er	nade under oath; than nd that my name ap	at I am an I	
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.								