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

PROFIT CORPORATION ANNUAL REPORT

1002



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 28 1998 8:00am Secretary of State

	1000]	
	MENT # P9700 ISRAEL & ASSOCIATES,)) ()
Principal Plac	ce of Business	Mailing Address				
		9670 GRIFFIN RD.				
9670 GRIFFIN RD. COOPER CITY FL 33324		COOPER CITY FL 33324				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
6 Dia-1-15	No. of D. of State of				10/31/1997	
2. Principal Place of Business		2a. Mailing Address			- ノッニハフゅうカルラ - -	plied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 A	t Applicable
22		27			5. Certificate of Status Desired Fee Re	
City & State		City & State				
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country Zip		Counti	Country 8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. 🛮 Yes] No
	9, Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent	
	an, craig j		8	1 Name		
9670 GRIFFIN RD.			8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
COOPER CITY FL 33324				_		
			8:	3		
			84	1 City	■ 85 Zip C	Code
44 0		100 1007 4500 El. 14. 0 1-4		<u></u>	FL ¹⁰ ²	
office or r	registered agent, or both, in the Sta	te of Florida. Such change was	utes, the about authorized b	ve-named cor by the corpora	poration submits this statement for the purpose of changing its ation's board of directors. I hereby accept the appointment as	registered
agent. I a	im familiar with, and accept the obli	igations of, Section 607.0505, F	Florida Statute	9\$.		
SIGNATURE	Signature, typod or printed name of registered a	Social and title if emplicable (NC	TITE Registered Ar	nent signature requi	ured when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.	gara organization	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12
TITLE	D DELETE		1.1 THLE		Change	Addition
NAME	DEAN, CRAIG J		1.2 NAME			i
STREET ADDRESS	9670 GRIFFIN RD.		1.3 STREET ADDRESS			
CITY-ST-ZIP	COOPER CITY FL 33324		1.4 CITY - ST - ZIP			
TITLE	D DELETE		2.1 TITLE		Change	Addition
NAME	ISRAEL, ELIAHU		2.2 NAME			
STREET ADDRESS	9670 GRIFFIN RD.		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	COOPER CITY FL 33324		2. 4 CITY	- ST - ZIP		
TITLE	☐ DELETE.		3.1 TITLE	1	L_I Change	Addition
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE	DELETE		3.4 CITY - 4.1 TITLE		Change	Addition
NAME	DILLETE		4. 2 NAME	ŀ	change	☐ Vogition
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		☐ DELETE,	5.1 TIFLE	OL* AIT	Change	Addition
NAME		_ · I			Chongo	
STREET ADDRESS	;		5.2 NAME 5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY -			
TITLE	☐ DELETE		6.1 TITLE		Change	Addition
NAME			6.2 NAME	1	•	
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-	ST-ZIP		
14. I hereby o	ertify that the information supplied	with this filing does not qualify.	for the exemi	otion stated in	Section 119 07(3)(i) Florida Statutes, Lifurther certify that the	oformation

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 or the receiver of 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 or the receiver of the contract of

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1/12/01/16/01/02/12