

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

FILED
Oct 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P9700009992
 1. Corporation Name
GOODMAN DESIGN, INCORPORATED

Principal Place of Business Mailing Address
450 JEFFERSON DRIVE, #206
DEERFIELD BEACH, FL 33442-9450

DO NOT WRITE IN THIS SPACE

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		5. Certificate of Status Desired		6. Election Campaign Financing	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0800036		<input type="checkbox"/> \$8.75 Additional Fee Required		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		Trust Fund Contribution		<input type="checkbox"/>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
Zip		Country		Zip		Country		<input type="checkbox"/> Yes <input type="checkbox"/> No	

3. Date Incorporated or Qualified

9. Name and Address of Current Registered Agent
EARLE JAY GOODMAN
450 JEFFERSON DRIVE, #206
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip 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 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	PRESIDENT
STREET ADDRESS	EARLE JAY GOODMAN
CITY-ST-ZIP	450 JEFFERSON DRIVE, #206
TITLE	<input type="checkbox"/> DELETE
NAME	SEC/TREAS.
STREET ADDRESS	JAMES JOHN GOODMAN
CITY-ST-ZIP	450 JEFFERSON DRIVE, #206
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	800002662698
34 CITY-ST-ZIP	-10/13/98--01043--045
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	***150.00
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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 its 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 in Block 14 in attachment with an address.

SIGNATURE:  **EARLE JAY GOODMAN 9/21/98 (954) 594-0038**

CR2E034 (10/97)



(2)

September 14, 1998

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee FL 32302-1500

Ladies and Gentlemen:

Our Attorney, Alan B. Fishman, Esq., upon hearing that we had not received the Corporation Annual Report, sent us the enclosed form. It seems that the form was sent to the wrong address due to Kimberly Rolfe.

Please accept this filing and the enclosed check for \$150.00.

If the address has not already been corrected, please note the correct address as printed below.

Thank you.

Very truly yours,
GOODMAN DESIGN, INC.


Earle Jay Goodman, Pres.

ejpg/cc:files
Enclosures