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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 06 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MEIN # 525450 NLLWOOD COMMONS L.T.,	` '			
Principal Place	e of Business	Mailing Address		r addinglib sin tilkat dittl disas atitl gsji glatt b	1911 \$1811 BISH BISH BISH FEBI
6 BRIGHTON RD		6 BRIGHTON RD			
BOX 5108		BOX 5108		DO NOT WOITE IN THE	0.004.00
CLIFTON NJ 07015		CLIFTON NJ 07015		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				·	ļ
9 Principal P	lace of Business	2a. Mailing Address		01/16/1991 4. FEI Number	Applied For
21	idog bi pisamoss	26		58-1984524	Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.			\$8.75 Additional
22	., 5.0	27		5. Certificate of Sfatus Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29]	10	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current		81 Name	10. Name and Address of New Registere	d Agent
UNITED STATES CORPORATION COMPANY 110 N MAGNOLIA ST. TALLAHASSEE FL 32301 83 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above				Address (P.O. Box Number is Not Acceptable) OI HAYES ST. ITE 105 BLAHASSEE For appropriation submits this statement for the numbers.	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or related many of registered agent and talled application. (NOTE: Registered Agent Signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD MODULAN	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	AXELROD, NORMAN 6 BRIGHTON RD		1.2 NAME		
STREET ADDRESS	CLIFTON NJ		1.3 STREET ADDRESS		
CITY-ST-ZIP	Tr	DELETE	1.4 C(TY-ST-ZIP	V/5	Change Addition
TITLE NAME	GILES, WILLIAM	☐ DUTE	2.1 TITLE 2.2 NAME	V/ D	Care Curande The Version
	6 BRIGHTON RD				
STREET ADDRESS	CLIFTON, NJH		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	R R	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	DICK, DAVID		3.2 NAME		
STREET ADDRESS	6 BRIGHTON RD		3.3 STREET ADDRESS		
	CLIFTON NJ				
CITY-ST-ZIP TITLE	D	DELETE	3.4. City-St-ZiP 4.1 Title		Change Addition
NAME	TOMASZEWSKI, JIM	aga wasang	4. 2 NAME		
STREET ADDRESS	6 BRIGHTON RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	CLIFTON NJ		4.4 CITY - ST - ZIP		}
TITLE	VEII TVITTIV	DELETE	51 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 oalls; 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.