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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

777 YAMATO ROAD. #135



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

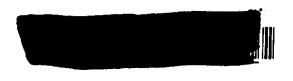
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(5)

P. N. MANAGEMENT COMPANY

Мε	failing Address	
C/	3/O I.F.D.	
	77 YAMATO ROAD, #135	
BC	OCA RATON FL 33431-4406	

FILED May 26 1998 8:00am Secretary of State



999 1911911 1 E 99191	L.,				
US	US		3. Date Incorporated or Qualified	3a. Date of Last Report	
			09/30/1992	04/02/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
i	28 4500 ROCKSIDE RD. \$440		65-0357316	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27 # 440		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State 28 INDEPENDENCE	OH	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 4 25		PAHOGA	8. This corporation has liability for in Florida Statutes	tengible tax under s. 199,032, Yes 🔣 No	
g. Name and Address of Current	Registered Agent	10	10. Name and Address of New Registered Agent		
C/O LF.D.	81	1 Name			
777 YAMATO ROAD Suite 135	62	Street Address (P.O. Box Number is Not Acceptable)			
BOCA RATON FL 33431	83				
۴	84	City		FL 85 Zip Code	
14 Distance to the estimates of Continue COT OFOR	and CO7 1500 Storido Statutes the above	a second second	and the state of t		

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						
	Signature, typed or printed name of registered agent and title if applicable	(NOTE:		s required when reinstating) DA		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	•	DELETE	1.1 TITLE		Change	Addition
NAME	ELRAD, MARTIN H		1.2 NAME			
STREET ADDRESS	1320 HANNA BUILOING		1.3 STREET ADDRESS			
CITY-ST-ZIP	CLEVELAND OH		1.4 CITY-ST-ZIP			
TITLE	\$	DELETE	2.1 TITLE	S	Change	Addition
NAME	HERCHEK, JAMES R		2.2 NAME	HERCHEK, JAMES R 1320 HANNA BLOG., C/O		
STREET ADDRESS	31200 SOLON RD #5		2.3 STREET ADDRESS	1320 HANNA BLOG., C/O	L1750N	ωc ,
CITY-ST-ZIP	SOLON OH		2.4 CITY-ST-ZIP	CLEVELAND, OH 44113	<u> </u>	
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			1.3 STREET ADORESS			
17Y-ST-ZIP	<u> </u>		3.4. CITY - ST - ZIP			
MUE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADORESS		j	4.3 STREET ADDRESS			
ITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
VAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			- 1
ITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	G.1 TATLE		☐ Change	Addition
IAME			52 NAME	800002536 : 05/27/9801034-	3780/	^ _/
TREET ADDRESS			6 3 STREET ADDRESS	-05/27/3801034-	-047 <i>T</i> Z	.26
ITY-ST-ZIP			6.4 CITY - ST - ZIP	*** 1 50 . 00	<i>ر</i> .	·

I do 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 on an attachment with an address.