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

DOCUMENT # P9600024701 (0)

5737 OKEECHOBEE BOULEVARD, INC.

Principal Place of Business	Mailing Address		
166 HARVARD DRIVE LAKE WORTH FL 33460	166 HARVARD DRIVE LAKE WORTH FL 33460		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified 03/19/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		65-0652999 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country 25	Zip 30	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent
SPINELLI, PHILIP V		81	1 Name
166 HARVARD DRIVE LAKE WORTH FL 33460		82	2 Street Address (P.O. Box Number is Not Acceptable)
		83	3
		84	FL 1 - 7 - 3 - 3 - 3
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehistating) DATE			
12. OFFICERS AND DIRECTORS 13.			gent signature required when relistating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
OH IOCHO AND BINCOTORIS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE 1.1 TITLE Change Addition SPINELLI, PHILIP V NAME 1.2 NAME 166 HARVARD DRIVE STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL 33460 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change 2.1 TITLE NAME SPINELLI, PAUL B 2.2 NAME 1300 LANDS END RD STREET ADDRESS 2.3 STREET ADDRESS MANALAPAN FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change ___ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 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.

SIGNATURE:

GEGUNDER, SINELLI

nh/97 54 5827.79/

FILED

Jan 28 1998 8:00am

Secretary of State

CR2E034 (10/97)