


FILED

Apr 09 1998 8:00am  
Secretary of State

<p>PROFIT CORPORATION ANNUAL REPORT <b>1998</b></p>		<p>FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS</p>
-----------------------------------------------------------------	-----------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------

Principal Place of Business	Mailing Address
Suite 502, Forum III 1655 Palm Beach Lakes West Palm Beach, 33401	Suite 502, Forum III 1655 Palm Beach Lakes West Palm Beach, 33401

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>	
<b>21</b>	1615 Forum Place	<b>2b</b>	1615 Forum Place
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
<b>22</b>	Suite 1B	<b>27</b>	Suite 1B
	City & State		City & State
<b>23</b>	West Palm Beach FL	<b>28</b>	West Palm Beach FL
	Zip Country		Zip Country
<b>24</b>	33494	<b>29</b>	33401
<b>25</b>	USA	<b>30</b>	USA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12-29-93

4. FBI Number	Applied For
65-0467382	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
--------------------------------------------------------	--------------------------	------------------------------------

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	
LEVY, Robert S.	81 Name
Suite 502 Forum III	82 Street Address
1655 Palm Beach Lakes Boulevard	83 1615
West Palm Beach, Florida 33401	84 Suite
	85 City
	West

10. Name and Address of New Registered Agent

Robert S.  
ss (P.O. Box Number is Not Acceptable)  
Forum Place  
e 1B  
Palm Beach FL 33401

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 *John S. King* DATE 3-10-98  
Signature typed or printed name of registered agent and title if applicable (If (11) Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	PD	<input type="checkbox"/> DELETE
NAME	LEVY, Robert S.	
STREET ADDRESS	1655 1/2 Blm Beach Lakes #502	
CITY-ST-ZIP	West Palm Beach, FL 33401	<input type="checkbox"/> DELETE
TITLE	S/T	
NAME	LEVY, Ceil N.	
STREET ADDRESS	1655 Palm Beach Lakes #502	<input type="checkbox"/> DELETE
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	AS	
NAME	BAKER, Marlene	<input type="checkbox"/> DELETE
STREET ADDRESS	1655 Palm Beach Lakes #502	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		
NAME		
STREET ADDRESS		<input type="checkbox"/> DELETE
CITY-ST-ZIP		
TITLE		
NAME		<input type="checkbox"/> DELETE
STREET ADDRESS		
CITY-ST-ZIP		

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LEVY, Robert S.	
1.3 STREET ADDRESS	1615 Forum Place, Suite #1B	
1.4 CITY - ST - ZIP	West Palm Beach, Florida 33401	
2.1 TITLE	S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	LEVY, Ceil N.	
2.3 STREET ADDRESS	1615 Forum Place, Suite #1B	
2.4 CITY - ST - ZIP	West Palm Beach, Florida 33401	
3.1 TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	BAKER, Marlene	
3.3 STREET ADDRESS	1615 Forum Place, Suite #1B	
3.4 CITY - ST - ZIP	West Palm Beach, Florida 33401	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	500002484585	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	-04/10/98--01005--032	
6.3 STREET ADDRESS	***150.00	
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:**

Robert S. Levy, Pres. 3-10-98 561/686-6080

CR2E034 (10/97)