22 27 5. Certificate of Status Desired City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution 1 24 25 29 30 Personal Property Tax due June 30. 1 24 25 29 30 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Age WAGNER, DENISE 4521 MERCADO DR 81 Name SEBRING FL 33872 81 Name 44 Pursuant to the provisions of Sections 607.0502 and 607.1508. Elorida Statutes the above-named corporation submits this statement for the purpose of ch	8 8:00at of State State
CORPORATION ANNUAL REPORT 1998 DOCUMENT # 235723 (4) OVERLOOK GROVES, INC. Principal Place of Business Add BRIDGES RD. Address OWA FL 338556701 US DO NOT WRITE IN THIS SPA ONA FL 338556701 US Suite, Apt. #, etc. 21 City & State 22 City & State 23 City & State 24 City & State 25 City & State 22 City & State 23 City & State 24 City & State 25 City & State 25 City & State 26 Suite, Apt. #, etc. 27 City & State 28 Suite, Apt. #, etc. 27 City & State 28 Suite, Apt. #, etc. 29 20 20 City & State 21 21 22 22 23 City & State 22 23 City & State 24 City & State 25 City & State 26 27 City & State 27 City & State 28 29 20 20 20 20 20 20 20 20 20 20	ACE ACE ACE ACE ACE ACE ACE ACE ADDIED For Not Applicable S8.75 Additional Fee Reguired S5.00 May Be Added to Fees
ANNUAL REPORT 1998 Secretary of State Division of CORPORATIONS DOCUMENT # 235723 (4) OVERLOOK GROVES, INC. Principal Place of Business Adds BRIDGES RD. Address Address	ACE ACE ACE ACE ACE ACE ACE ACE ADDIED For Not Applicable S8.75 Additional Fee Reguired S5.00 May Be Added to Fees
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Zip Country Zip Country B. This corporation owes or has paid the current Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WAGNER, DENISE 81 4521 MERCADO DR 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL	Yes 🗌 No
Pursuant to the provisions of Sections 607 0502 and 607 1508. Elorida Statutes, the above-named corporation submits this statement for the purpose of ch	
WAGNER, DENISE 4521 MERCADO DR SEBRING FL 33872 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 8	
SEBRING FL 33872 83 64 City FL 8 1. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above named corporation submits this statement for the purpose of ch	
Big Big Big Big Big Big Big Big Big	······
FL	
Pursuant to the provisions of Sections 607 0502 and 607 1508 Elocide Statutes, the above named comporation submits this statement for the purpose of ch	85 Zip Code
	anging 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	Itment as registered
SIGNATURE Denis Udgene Busines Mg 4-20-98 Signature. typed or printed name of registered agent and the it applicable (NOTE: Registered Agent is gnatuffrequired when reinstating) DATE	
2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DI	
	Change Addition
AME ABRONS, HERBERT L. 1.2 NAME STREET ADDRESS 510 MADISON AVE 1.3 STREET ADDRESS	
NTY-ST-ZIP NEW YORK NY 1.4 CITY-ST-ZIP	
	Change 🛄 Addition
ITREET ADDRESS 510 MADISON AVE 23 STREET ADDRESS	
ITY-ST-ZIP NEW YORK NY 2.4 CITY-ST-ZIP	
	Change Addition
AME ABRONS, RICHARD S. 32 NAME STREET ADDRESS 437 MADISON AVE. 3.3 STREET ADDRESS	
NTY-ST-ZIP NEW YORK NY 34. CITY-ST-ZIP	
ITLE S AT DELETE 41 TITLE Sec Latha Natarajan	Change 🔀 Addition
AME COLEMAN, SYLVIA M STREET ADDRESS 510 MADISON AVE 43 STREET ADDRESS 510 Madison ave	
ITY-ST-ZIP NEW YORK NY 44 CITY-ST-ZIP NY, NY 10032	
	Change Addition
ARANOW, RITA A 5.2 NAME TREET ADDRESS 47 COLBY LANE 5.3 STREET ADDRESS	
ITY-ST-ZIP SCARSDALE NY 5.4 CITY-ST-ZIP	
	Change 🔲 Addition
AME 6.2 NAME ITREET ADDRESS 6.3 STREET ADDRESS	
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 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	r 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 in Block 12 or Block 13 if changed, or on an attachment-with an address.	name appears in