## 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 #
1. Corporation Name

(6)

## **FILED** Apr 27 1998 8:00am Secretary of State

Ange	INIU FUKNITUKE CUMPAN	IT, ING			
Principal Plac	e of Business	Mailing Address			1 (40)16 (1809 11110 1919) 11111 91931 11111 91911 91811 91911 91911 91911 91911 91911 91911 91911 91911 91911
2019 PEMBROKE ROAD 2019 PEMBROKE ROAL					
HOLLYWOO	00 FL 33020	HOLLYWOOD FL 33020	)		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					08/04/1960
	lace of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt. #, etc.		Suite, Apt #, etc.			59-6057929   Not Applicable
22		27			5. Certificate of Status Desired See Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23	<del></del>	28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curre	29 Pagistered Agent	30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
A	RGENIO, GEORGE	an registrop right		31 Name	10. Haine and Address of Hew registered Agent
2019 PEMBROKE RD.			ļ.	32 Street A	Address /DO Day Number is Not Assertable)
HOLLYWOOD FL 33020			1	Street A	Address (P.O. Box Number is Not Acceptable)
			[4	13	
			l <sub>e</sub>	14 City	85 Zip Code
		· · · · · · · · · · · · · · · · · · ·		. ]	FL
11. Pursuant office or r	<b>to the</b> provisions of Sections 607.05 <b>egiste</b> red agent, or both, in the State	02 and 607.1508, Florida Statut e of Florida. Such change was a	es, the abo authorized	ove-named o by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	gations of, Section 607. <b>050</b> 5, Flo	orida Statu	tes.	• • • • • • •
SIGNATURE	Signature, typed or punted name of registered as	uent and trie it applicable (NOT	E Registered	Agent signature r	required when reinstating) DATE
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VTS	☐ DELETE	1.1 711).	F	Change Addition
NAME	ARGENIO, BARBARA		1.2 NAM	E	
STREET ADDRESS	2019 PEMBROKE RD.			EET ADORESS	
CITY-ST-ZIP TITLE	HOLLYWOOD FL PD	DELETE		- S1 - ZIP	Change Addition
NAME	ARGENIO,GEORGE		2.1 TITL 2.2 NAM		Change   Addition
STREET ADDRESS	2019 PEMBROKE RD.			ET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL			(-ST-ZIP	
TITLE		DELETE	3.1 TITL		Change Addition
NAME			3.2 NAM	E	
STREET ADDRESS			3 3 STR	ET ADDRESS	
CITY-ST-ZIP				r-ST-ZIP	
TITLE		L_J DELETE	41 TITE		☐ Change ☐ Addition
NAME			4. 2 NA		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5 1 TITL	- ST - <b>Z</b> IP	Change Addition
NAME		First Country	5 2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP				- ST - ZIP	
TITLE		DELETE	6.1 TITL		Change Addition
NAME			6.2 NAM	E	
STREET ADDRESS			6.3 STR	ET ADDRESS	
CITY-ST-ZIP				- ST - ZIP	
14. I hereby o	ertify that the information supplied v	vith this filing does not qualify fo	or the exen	notion stated	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this armular roport or supplied with this timing does not quality for the exemption stated in decided in 19.07(3)(), Florida Statutes, I former certify that the information indicated on this armular report or supplied entitle annual report of supplied to ath; 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.