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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

FIVE-TWENTY, INC.



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

265501

(7)

## **FILED** Jan 23 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing	Mailing Address				T (BOTTA MAIA BINAL BINAL BININ BOTAL LIOT ATOM BIDNY ATOM ATOM BION ATOM ATOM		
601 \$ 19TH AVE #9			601 S 19TH AVE #9						
HOLLYWOOL	) FL 33020	HOLLY	WOOD FL 33020				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							12/26/1962		
2. Principal P	lace of Business	2a. Mail	2a. Mailing Address				4. FEI Number Applied F	or	
21		26	26				<b>59-1086272</b> Not Applie	cable	
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Addition		
22		27					Fee Required		
City & Stat	e	— `	City & State				6. Election Campaign Financing \$5.00 May Bo		
23		28					Trust Fund Contribution Added to Fees		
Zip	Country	Zip		<b></b>	ntry		8. This corporation owes or has paid the current year Intangible	<i>'</i>	
24	9. Name and Address of Curren	29	Agent	30		<del> </del>	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
KEQLER, ELIZABETH					B1	Name			
	1 SOUTH 19TH AVENUE #9				82				
	DLLYWOOD FL 33020					Street	Street Address (P.O. Box Number is Not Acceptable)		
***	DELIVIOUD / E 33020				83				
					84	City	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.050	)2 and 607.15	08. Florida Statu	tes, the ab	ove	-namod	d corporation submits this statement for the purpose of changing its regist	ered	
office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Su	ich change was :	authorized	Ιbγ	the corr	rporation's board of directors. I hereby accept the appointment as registe	red	
	an jaminar with, and accept the oblig	miloris or, soc	(IO/1 007.0005, 11	Uliua Stati	162				
SIGNATURE	Bignature, typed or printed name of registered ag-	ent and little if applic	cable. (NO	L Repistered	Agei	n signature	re required when reinstating) DATE		
12.	OFFICERS AN	D DIRECTOR	S	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2	
TITLE	PD		DELETE 1.1		l E		☐ Change ☐ Ac	ddition	
NAME	BARRETT, MARY			1.2 NA	ME				
STREET ADDRESS	520 S 19TH AVE #8				1.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL			1.4 CITY-ST-2		-ZIP			
TITLE	SD DANNE		DELETE	2.1 TITLE			Change Ac	ddition	
NAME	PALILOZZA, DANNY				2 2 NAME		CAMPLA LOILBERT	1	
STREET ADDRESS	520 S. 19TH AVE #9				23 STREET AL		CAMPERL, GILBERT 520 B. 19 Ave apt 10 HOLLY WILD FLA 33020	1	
CITY-ST-ZIP	HOLLYWOOD FL		55,536		2. 4 CITY - ST - ZIP		HOLLY WIGO 1-4 A 33020		
TITLE	VP DELETE		3.1 TIT			Change L Ac	adition		
NAME	KUSIW, OLGA			3.2 NAI				İ	
STREET ADDRESS	520 S 19TH AVE, APT 6					ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL	<del></del>	DELETE	3.4. CI		1-7IP	Change Ac	ddilion	
TITLE			THEFE IE	4.1 TiT			Change Ac	JUNION	
NAME				4 2 NA		ADORESS		ŀ	
STREET ADDRESS									
CITY-ST-ZIP TITLE			☐ DELETE	4.4 CIT 5.1 TIT		- <u>/</u>   '	Change Ac	ddition	
							Colonido Por	10.(10.1	
NAME CTOSET ADDRESS				5.2 NA		ADDRESS			
STREET ADDRESS				5.4 CIT					
CITY-ST-ZIP TITLE		<del></del>	☐ DELĒTE	6.1 TIT		- TIL	Chapee D. Ac	dition	
NAME				6.2 NA			50000241110 (%) 30 % -01/26/980101001		
STREET ADDRESS						ADDRESS	1 2017/20/30==01010==016	1	
CITY-ST-ZIP				6.4 CIT			***150.00 'W2	'	
	certify that the information supplied w	vith this filing o	toes not qualify f				ted in Section 119.07(3)(i). Florida Statutes. I further certify that the information	ation	

Thereby certify triat the information supplied with this hing does not qualify for the exomption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatic 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.