## 5-15-98 B 7419 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

STREET ADDRESS

14. I hereby certify that the information indicated on this annual report in officer or director of the corporation. Block 12 or Block 13 if chang

CITY-ST-ZIP

FILED **PROFIT** May 15 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name (6)HOWARD B. STEVENS, INC. Principal Place of Business Mailing Address 3230 ST. JAMES DR 3230 ST. JAMES DR. **BOCA RATON FL 33434 BOCA RATON FL 33434** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/05/1968 2. Principal Place of Business 2a. Mailing Address Applied For 6080 OKEECHOBEE BLUD 6080 Okerchober BUDGE 59-1206530 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired SUITE 200 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be PALM BEACH, FL PALM 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible USA 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FELLMAN, HOWARD J FELLMAN HOWARD 6930 PALMETTO CIR. S. #202 Street Address (P.O. Box Number is Not Acceptable)
6080 OFFEC WOLL BLVD 82 **BOCA RATON FL 33433** 83 11. Pursuant to the r Ind 607.1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered to 61, Section 607.0505, Florida Statutes. office or register agent. I am fan SIGNATUR Lagent and title it applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition CELLONAN, HOWARD NAME FELLMAN, HOWARD 1.2 NAME 6080 OKEECHOBER BLUD STREET ADDRESS 3230 ST. JAMES DR. 1.3 STREET ADDRESS WEST PALM BRACH, FL 33417 **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE ☐ Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREFT ADDRESS 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 - S1 - ZIP DELETE TITLE 4.1 TITLE Change Addition 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 6.2 NAME

**6.3 STREET ADDRESS** 

6.4 CITY - ST - ZIP

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information strue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an impowered to execute this report as required by Chapter 607, Florida Statutos; and that my name appears in address.

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