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 #

(6)

FILED Aug 27 1998 8:00am Secretary of State

J.K. DI Principal Plac 4110 E. 11TI HIALEAH FL	e of Business	Mailing Address 4110 E. 11TH AVE. HIALEAH FL 33013		DO NOT WRITE IN 7F	
				05/29/1973	
-	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# alc	26 Suite, Apt. #, etc.		26-4647214	Not Applicable
22	#, BIC.	27 Suite, Ajr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
KUZNARIK, JOHN 724 90 ST SURFSIDE FL 33154			o Name	·	
			82 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
90	JKPOIDE PL 33134		83		
	,				
			64 City	F	85 Zip Code
SIGNATURE 12. TITLE	Signature, typed or printed name of registered OFFICERS	agent and title if applicable (NOTE AND DIRECTORS DELETE	: Registered Agent signature red	quired when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	
NAME	KUZNARIK, JOHN	OCLETE	1.1 TITLE		Change Audinor
STREET ADDRESS	724 90 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	SURFSIDE FL		1.4 CITY-ST-ZIP		
THILE	VPS	☐ DELET E	21 TITLE		Change Addition
NAME	MASON, SHIRLEY A		22 NAME		
STREET ADDRESS	724 90 ST		2.3 STREET ADDRESS		
CITY-S1-ZIP	SURFSIDE FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change
NAME !			3.2 NAME		
STREET ADORESS CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		_
STRFET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIF			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TILE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-SI-7IP		Therese	5.4 CITY-ST-ZIP		D Observe T C 1 000
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	in Section 119.07(3)(i). Florida Statutes, I furthe	

Interest complete the monitorial supplied with this tiling does not quality for the exemption stated in section 118.07(5)(f), Florida Statutes. Turner 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.