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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 528424 FLORIDA BULLETIN AND DIRECTORY CO., INC.

FILED Apr 17 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 8308 NW 80TH ST. 8308 NW 80TH ST. TAMARAC FL 33321 TAMARAC FL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/18/1977 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1718579 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Ζıp Ζφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name PRAVDA, DON 1855 N.E. 115TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) NO. MIAM! FL 33181 83 City 85 Zip Code 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TILLE PRAVDA, DON NAME 1.2 NAME 1655 N.E. 115 ST. STHEFT ADDRESS 1.3 STREET ADDRESS NO. MIAMI FL CHTY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2 1 TITLE TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 31 TITLE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CHTY-ST-76 DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET AODRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST ZIP DELETE 6.1 TITLE ☐ Change Addition NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP 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 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 chapped, or on an attactiment with an address.

SIGNATURE:

CR2E034