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

Mailing Address

7601 N FEDERAL HWY SUITE 200A

BOCA RATON FL 33487

2a. Mailing Address

Suite, Apt. #, etc.

26

PROFIT 🚜 CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 557784

Principal Place of Business

2. Principal Place of Business?

Suite, Apt. #, etc.

7601 N FEDERAL HWY

SUITE 200A **BOCA RATON FL 33487**

DUFFEY & DUFFEY, CHARTERED ATTORNEYS

\$ 8. E

!		27				- F86 IV	equired
City & State		City & State			6. Election Campaign Financing	\$5.00	
		28			Trust Fund Contribution	Added	o Fees
Zip T	्रें: Country	Zip	Country	•	8. This corporation owes the current	year Intangible	□No
<u> </u>	25		30		Personal Property Tax. 10. Name and Address of New Reg		- INU
	9. Name and Address of Current	registered Agent	81	Name	TU. Name and Address of New Reg	Intered Whenr	
או ובו	FEY, CLAUDIA			.101110		_,	
7601	N FEDERAL HWY.		82	Street Addr	ress (P.O. Box Number is Not Acceptable	·)	
	E 200A		83				*
3348					ing its a ringer like with	1 3 F June 1 - 4 7 2 1	A 4 4 4
5510			84	City	and the second of the second o	FI 85 Zip	Code
Ist Directors	to the provisions of Sections 607 050	2 and 607 1508. Florida Statute	s the above	named corn	poration submits this statement for the pu	rpose of changing its	registered
 office or re 	egistered agent for both, in the State of	of Florida. Such change was au	thorized by th	he corporation	on's board of directors. I hereby accept the	ne appointment as re	gistered
agent. I a	m familiar with, and accept the obligat	ions of Section 607.0505, Flori	da Statutes.	*		- " 	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable (NOTE	Registered Agent	signature require	ed when reinstating)	DATE	
12.	OFFICERS AN		13.	Organization to quint	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
ITLE	PD	☐ DELETE	1.1 TITLE		1. 1. 1.	☐ Change	☐ Addition
AME	DUFFEY, CLAUDIA		1.2 NAME				
TREET ADDRESS	7601 N FEDERAL HWY., SUITE	200-A	1.3 STREET A	ADDRESS			
ATY-ST-ZIP	BOCA RATON FL	· == - · ·	1.4 CITY-ST-	ZIP	<u> </u>		
ITLE	7	☐ DELETE	2.1 TITLE			Change	☐ Addition
AME	, <u>,</u>		2.2 NAME				
TREET ADDRESS	S. P.		2.3 STREET	ADORESS			
ITY-ST-ZIP			2. 4 CITY+ST	- ZIP	<u> </u>	·	<u> </u>
ITLE		☐ DELETE	3.1 TITLE			∵ ☐ Change	Addition
IAME	1 3 × 4 × 5	• •	3.2 NAME				
3.0							
TREET ADDRESS			3.3 STREET	ADDRESS			
TREET ADDRESS		_	3.4. CITY-ST				
:- Tar		☐ DELETE				Change	Addition
ITY-ST-ZIP ITLE AME		☐ DELETE	3.4. CITY-ST			Change	
TTY-ST-ZIP		☐ DELETE	3.4. CITY-ST 4.1 TITLE	- ZIP		. Change	
TTY-ST-ZIP TILE AME TREET ADDRESS TTY-ST-ZIP		_	3.4. CITY-ST 4.1 TITLE 4. 2 NAME 4.3 STREET / 4.4 CITY-ST	- ZIP ADDRESS			Addition
TY-ST-ZIP AME TREET ADDRESS TY-ST-ZIP TILE		☐ DELETE	3.4. CITY-ST. 4.1 TITLE 4. 2 NAME 4.3 STREET A 4.4 CITY-ST- 5.1 TITLE	- ZIP ADDRESS		☐ Change	Addition
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ITY-ST-ZIP TILE AME TREET ADDRESS TTY-ST-ZIP TREET ADDRESS ITY-ST-ZIP		☐ DELETE	3.4. CITY-ST 4.1 TITLE 4.2 NAME 4.3 STREET / 4.4 CITY-ST- 5.1 TITLE 5.2 NAME 5.3 STREET / 5.4 CITY-ST-	-ZIP ADDRESS -ZIP ADDRESS		☐ Change	Addition
ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP	Barrier 18	_	3.4. CITY-ST 4.1 TITLE 4.2 NAME 4.3 STREET / 4.4 CITY-ST 5.1 TITLE 5.2 NAME 6.3 STREET / 5.4 CITY-ST 6.1 TITLE	-ZIP ADDRESS -ZIP ADDRESS			Addition
ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP	Range College Telegraphy	☐ DELETE	3.4. CITY-ST 4.1 TITLE 4.2 NAME 4.3 STREET / 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET / 5.4 CITY-ST 6.1 TITLE 6.2 NAME	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	-	☐ Change	Addition
TY-ST-ZIP	Barrier 18	☐ DELETE	3.4. CITY-ST 4.1 TITLE 4.2 NAME 4.3 STREET / 4.4 CITY-ST 5.1 TITLE 5.2 NAME 6.3 STREET / 5.4 CITY-ST 6.1 TITLE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP		☐ Change	☐ Addition

FILED Jan 21, 1999 8:00am **Secretary of State**

01-21-1999 90008 027 ***150.00

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DO NOT WRIT	TE IN THIS SPACE
3. Date Incorporated or Qualifed	, .
12/30/1977 4. FEI Number	Applied For
<u>59-2014698</u>	Not Applicable
5. Certifcate of Status Desired	\$8.75 Additional Fee Required
Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
This corporation owes the curre Personal Property Tax.	ent year Intangible Yes No
10. Name and Address of New R	Registered Agent
(P.O. Box Number is Not Accepta	ible)
And the second second	And the second of the second o
2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip Code
tion submits this statement for the	purpose of changing its registered
s board of directors. I hereby accep	ot the appointment as registered
·-···	* **
ADDITIONS/CHANGES TO GE	FICERS AND DIRECTORS IN 12
ADDITIONS/CHARGES TO OT	Change Addition
	Change Addition
	Change Addition
	Change Addition
•	
	☐ Change ☐ Addition
• •	
	☐ Change ☐ Addition

officer or director of the co Block 12 or Block 13 if ch

SIGNATURE: