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

FILED Jan 09 1998 8:00am Secretary of State

DOCU 1. Corporatio		# 5699 DEVELOPMEN		(7)						
GOLDI	-14 1 0140	DEVELOT WILL								
Principal Plac	e of Busines	_ .	Mail	ling Address					II OIDII EIBII O	IDE OLDINE INCH
4100 N. HILLS DR. 4100 N. HILLS DR.										
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021										
								DO NOT WRITE IN THIS	SPACE	
								3. Date Incorporated or Qualified 05/17/1978		
2. Principal P	lace of Busin	ness	2a. N	2a. Mailing Address				4. FEI Number	P	applied For
21 Calta Ami	4 -1-	- <u></u>	26	Suite, Apt. #, etc.				59-1827457		lot Applicable
Sulte, Apt.	₩, G IC.		 	27				5. Certificate of Status Desired		Additional Regulred
City & State	Α			City & State				A Floring Opening Fire and		
23	<u> </u>		28	28			·	6. Election Campaign Financing Trust Fund Contribution	Addec	May Be I to Fees
Zip	ļ	Country Zip			Cour	ntry		8. This corporation owes or has paid the cu		
24 25 29 3 9. Name and Address of Current Registered Agent						Personal Property Tax due June 30. Yes No. 10. Name and Address of New Registered Agent				□ No
FEINBERG, MICHAEL							Name	10. Hame and Address of New Hegistered	Main	
	00 N. HILLS					81 82				
							Street Address (P.O. Box Number is Not Acceptable)			
HOLLYWOOD FL 33021						83				
					L					
						84	City	FL	85 Zip	Code
11. Pursuant	to the provisi	ons of Sections 607 ent, or both, in the S	.0502 and 607 late of Florida	.1508, Florida Statu Such change was	tes, the ab authorized	ove-	named corp	poration submits this statement for the nurpose of	L changing	its registered s registered
agent. I a	m ita miliar wi	th, and accept the o	bligations of, 5	Section 607.Ŏ505, Fl	orida Statu	ites.		tion's board of directors. I hereby accept the app		
	Signature, typed	or printed name of registere	-	···	E: Registered	Agen	l signature requi	red when reinstating) DATE		
12.	OFFICERS AND DIRECTORS PSD DELETE				_	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE		DO MICHAEI		☐ DELETE 1.11					☐ Change	☐ Addition
NAME	FEINBERG, MICHAEL MORESS 4100 N. HILLS DR.			1.2 N						
STREET ADDRESS		VOOD FL					DDRESS			Į:
CITY-ST-ZIP TITLE		100011		DELETE 2.11			- ZIP		Change	Addition
NAME				2.2 N					C Onlange	
STREET ADDRESS	ss					2.3 STREET ADDRESS				
CITY-ST-ZIP				2.4 Cl						
TITLE	-			DELETE 31				STEMPORY OF STREET, ST.	Change	Addition
NAME	ME			3.2 N/					•	
STREET ADDRESS					3.3 STR	EET A	DDRESS			
CITY-ST-ZIP					3.4. CIT	Y-ST	- ZIP			
TITLE				☐ DELET E	4.1 TITL	.E			Change	Addition
NAME					4. 2 NAI	ME				
STREET ADDRESS					4.3 STR	EET A	DORESS			
CITY-ST-ZIP					4.4 C(T)	Y-\$T-	ZIP			
TITLE				☐ DELETÉ	5.1 TITL	.E	-		☐ Change	☐ Addition
NAME					5.2 NAM	ΛE				
STREET ADDRESS					5.3 STR	A F33	DORESS			
CITY-ST-ZIP	<u> </u>			- Ariese	5.4 CITY		ZIP	Account of the contract of the	T -	
TITLE				☐ DELÉTÉ	6.1 TITL		-		☐ Change	Addition
NAME					6.2 NAM					
STREET ADDRESS					6.3 STRI					
CITY-ST-ZIP	antifications at a	information augusti	al college de la CO		6.4 CiTY	/-SI-		Castian 110 07/2/63 Florida Statutas I further as	-116 - 41 6 N	

Interest 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 changed, or on an attachment with an address.