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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

**FILED** Apr 14 1998 8:00am Secretary of State

1. Corporatio PHOEN	IX LIMITE		′	(1)					PI 31811 1881
Principal Place	e of Business	s	٨	Mailing Address			1 SEGLOL BLANT NODIA NODIA NOLIN RUSAN SORTI GURLL BLA	LL MYNNI BLEIN ON	ELL MININ (NO)
% SIDNEY GURSEY				% SIDNEY GURSEY			·		
8636 NW 57 ST #214				6636 NW 57 ST #214					
TAMARAC FL 33319				TAMARAC FL 33319			DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		ļ
2. Principal Place of Business				Mailing Address			06/14/1978 4. FEI Number	<del>-1' 1.</del>	
21			26				59-1921727		pplied For lot Applicable
Suite, Apt. #. etc.				Suite, Apt. #, etc.					Additional
22				27			5. Certificate of Status Desired	<b>—</b>	Required
City & State				City & State			6. Election Campaign Financing	<del></del>	May Be
23				28			Trust Fund Contribution		to Fees
Zip	Country			Zip Cou		у	8. This corporation owes or has paid the current year Intangible		
24	25		29	30			Personal Property Tax due June 30. Yes No		□ No_
	9, Name	and Address of Curre	nt Regi	istered Agent			10. Name and Address of New Registered	Agent	
GURSEY, SIDNEY					81	Name			
6636 NW 57 ST.					82	Street Address (P.O. Box Number is Not Acceptable)			
TAMARAC FL 33319									
				83					
				84 City		City	Fi	85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, I						re-named co			ite registered
office or r	egistered ag	ent, or both, in the State	of Flor	rida. Such change was	authorized b	y the corpor	ration's board of directors. I hereby accept the ap	pointment a	s registered
SIGNATURE	THE CONTINUES WIT	ur, and accept the camp	anon's t	or, section don 5505, Fr	ionida Statute	75.			
SIGNATORE	Signature, typed	or purified name of registered ag			TE: Registered A	gent signature rec	quired when reinstating) DATE		
12.		OFFICERS AN	D DIRE		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	COLDETEN AL			DELETE 1.1 TIT				Change	Addition
NAME	TALE BODOL PROPER BOLD			1.2 NAME					
STREET ADDRESS	BOYNTON BEACH FL					T ADDRESS			{
CITY-ST-ZIP	DUINIC	N DEACH FL		DELETE	1.4 CITY- 2.1 TITLE			Change	Addition
TITLE	ĺ					1		L Change	Addition
NAME STREET ADDRESS	.			2		T ADDRESS			
CITY-ST-ZIP TITLE				DELETE	2. 4 CITY 3.1 TITLE	-81-217		Change	Addition
NAME					3.2 NAME				
STREET ADDRESS						T ADDRESS			
CITY-ST-ZIP					3.4. CITY				ļ
TITLE				DELETE	4.1 TITLE			Change	☐ Addition
NAME					4. 2 NAM	: }			ì
STREET ADDRESS					4.3 STREE	T ADDRESS			
CITY-ST-ZIP					4.4 CITY -	ST-ZIP			
TITLE				DELETE	5.1 TITLE			Change	☐ Addition
NAME					5.2 NAME				1
STREET ADDRESS	•				5.3 STREE	T ADDRESS			j
CITY-ST-ZIP					5.4 CITY	ST-ZIP			
TITLE				☐ D£LETE	6.1 TITLE			Change	Addition
NAME					6.2 NAME				
STREET ADDRESS					6.3 STREE	T ADDRESS			
CITY-ST-ZIP	·				64 CITY-	ST-ZIP			

14. Thereby 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 required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an officer or director of the corporation of the receiver with an address.

**SIGNATURE:**