## 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 # 642087

(1)

HITCHCOCK & CUNNINGHAM, A PROFESSIONAL ASSOCIATION

## FILED Jan 20 1998 8:00am Secretary of State



						.B  8    B  8    B  8   B  8   B  8   B  8     8
Principal Place of Business Mailing Address					( Indicio ditit Alden einer angebe einer eine	
OCIATION OCIATION						
613 S.E. 1ST AVENUE		613 S.E. 1ST AVENUE		DO NOT WORTH WATER OF CO.		
FT LAUDERDA	ALE FL 33301	FT LAUDERDALE FL 33301		DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified 10/18/1979	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2166452	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State		City & Stale	<u>├</u> ┐ '		6. Election Campaign Financing	\$5.00 May Be
23		Zip Country		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	<del></del>	iuy	8. This corporation owes or has paid Personal Property Tax due June 3	
24	9. Name and Address of Curre	29 29 Agent	30		10. Name and Address of New Reg	
LIIT	CHCOCK, R.H., ATTY.	int trogistorou rigoni		81 Name		
613 SE 1ST AVE			_			
	LAUDERDALE FL 33301			82 Street Address (P.O. Box Number is Not Acceptable)		
	PRODEIDAGE 16 00001			83		
				84 City		FL 85 Zip Code
44. Discount to the provisions of Sections 607,0503 and 607,1509. Elevide Statutes, the phase 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 typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
12.		VD DIRECTORS	13.	Agort signature rut	ADDITIONS/CHANGES TO OFFICE	
TITLE	P DELETE		1.1 T()			Change Addition
NAME	HITCHCOCK, R.H.	<del></del>	1.2 NA			-
STREET ADDRESS	613 S.E. 1ST AVE			EET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL			Y - ST - ZIP		
TITLE	V DELETE		2.1 111			☐ Change ☐ Addition
NAME	CUNNINGHAM, GERALD M.		2.2 NA	VE		
STREET ADDRESS	613 S.E. 1ST AVE		2.3 STE	EET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2, 4 CI	Y - ST - ZIP		
TITLE	DELETE		3.1 T(T	.E		☐ Change ☐ Addition
NAME			3.2 NA	VIE .		
STREET ADDRESS			3.3 STF	REET ADDRESS		
CITY-ST-ZIP			3.4. CI	Y-S1-ZIP		
TITLE	☐ DELETE		4.1 1(1	.E		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STF	REET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y - ST - ZIP		
TITLE		DELETE	5.1 TIT	LE .		Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 \$78	REET ADDRESS		
CITY-ST-ZIP			5.4 CIT	Y - ST - ZIP		
TITLE		☐ DELETE	6.1 TIT	LE		Change Addition
NAME		•	6.2 NA	ME		
STREET ADDRESS			6.3 \$78	REET ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y - ST - ZIP		
	adily that the information supplied	with this filing door not qualify	for the eve	motion stated	in Section 119 07/3)(i) Florida Statutes, Lfr	irther certify that the information

• I nerepy certify that the information supplied with this tilling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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.

CIGNATURE SEAN ) A. To Office

In 6 1888 (2541462-1661