PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 652930

(9)

ABLEVEST HOLDINGS, INC.

FILED Jan 23 1998 8:00am Secretary of State



Suite, Apt. #, etc. 27 City & State City & State Zip Country Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Fee Required Fee Required Fee Required Status Desired Fee Required Fee Required Status Desired Fee Required Status Desired Fee Required Fee R	Principal Place of Business Mailing Addr					
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2. Principal Place of Business	BOCA RATON	FL 33432				DO NOT WRITE IN THIS SPACE
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11. Pursuant to Hor Device of Service 607-502 and 607-1508 Florida Statutes, the above-named corporation submits this statement for the purpose of earlying in registered office or register or young to the content of the purpose of the purpose of the application of 2005, Robins Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS IN 12 DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE POWNER AND DIRECTORS IN 12 INTIRE 13. STREET ADDRESS OF THE STREET ADDRESS OF TH	130	O N. FEDERAL HWY, #110		-	32 Stre	eet Address (P.O. Box Number is Not Acceptable)
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11. Pursuant to the processor of SD 2502 and 607 1509/Pionof Statutes, the above-named corporation submits this statement for the purpose of changing its registered signature s				ļ	24 Cibu	es Zio Code
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Signature Sign	11. Pursuant	to the provisions of Sections 607.95	02 and 607, 1509, Florida Statu	tes, the ab	ove-nam	ned corporation submits this statement for the purpose of changing its registered
Signature Sign	office or r	egistered agent, or both in the State	Florida. Eydh charga was	authorized	by the c	corporation's board of directors. I hereby accept the appointment as registered
12.	1 .	in a plua de la come d	gaillian garion de riosos, r	ioriua Stati	100.	01/12/00
12.	SIGNATURE		ing title if applicable (NO	TF Registered	Agent sinna	ature required when reinstation) DATE
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	City-ST-ZiP	and for that the information or all ad	with this filling does not qualify	for the eve	r-SI-ZIP	stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information

Indicated on this annual report or supplied with this name does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes, I further certification incloated 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 order 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.

01/13/98 368-7775 (561)