## 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 # 691403

(0)

**FILED** Mar 25 1998 8:00am Secretary of State

1. Corporatio		_			(-)										
2225 H	KEYSTON	IE MANO	r, inc.												
Principal Plac	e of Busines			M	Mailing Address										
Principal Place of Business Mailing Address  * STEVEN MONUS * STEVEN MONUS															
807 NORTH SOUTH LAKE DRIVE 807 NORTH SOUTH 1							Ē			DO NOT HERE IN THE OR AGE					
HOLLYWOOE	) FL 33019				HOLLYWOOD FL 33019					DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS S	PACE		~	7
										06/22/1981					
2. Principal Place of Business					2a. Mailing Address					4. FEI Number			Applie	od For	1
21					26					59-2102618				pplicable	4
Suite, Apt. #, etc					Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Add Requi		1
City & State					City & State					Election Campaign Financing \$5.00 May Be					1
23					28					Trust Fund Contribution		Adde			]
Zip	· — ·			$\vdash$	~ ·			Country		8. This corporation owes or has pai	_	~ .			
24	9. Name and Address of Current			29 Regis	tered Agent					Personal Property Tax due June 10. Name and Address of New Reg			∐N		-
SI	JGAR, EDN		33 01 00110111	, iog.			81	Name		10, 110110 1110 11101000 01 110111101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·yon.			1
950 S. FEDERAL HWY HOLLYWOOD FL 33020							82	Street	Addres	Address (P.O. Box Number is Not Acceptable)			•	╣	
									(F.O. BOX NOTION IS NOT ACCEPTABLE)						4
							83								
							84	City		<b>FL</b> 1			р Сос		
11. Pursuant	to the provis	sions of Sect	ions 607.0502	and 6	607.1508, Florida Statu	tes, the	above ed by	-name	corpor	ration submits this statement for the pan's board of directors. I hereby accep	urpose of	changing	its re	gistered	1
agent. 1 a	m familiar w	ith, and acc	ept the obligat	ions o	of, Section 607.0505, FI	orida St	atules	s.	porans		t tilo upp	JII 10 7 30 11 C		1010100	ì
SIGNATURE	Signature, types	d or printed nemo	nl registered agent	and title	ie if applicable (NO	TE Registe	red Age	ent signatur	e required	when reinstating)	DATE		—-		1_
12.	· · · · · · · · · · · · · · · · · · ·		FFICERS AND			13				ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	)RS II	N 12	] <u>{</u>
TITLE	PD				DELETE	1.1	TITLE					Change	, [	Addition	15
NAME	MONUS, STEVEN 807 N SOUTH LAKE DRIVE						NAME								3
STREET ADDRESS	HOLLYWOOD FL							ADDRESS							ŭ
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NAME					_		NAME								
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NAME	!					3.2	NAME								
STREET ADDRESS						3.3	STREET	ADDRESS							
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	1					1		ADDRESS	1						1
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14. I hereby 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 of the receiver of 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.

SIGNATURE:

STEVEN MONUS 3-18-98

922-3074