

327-98 B 3835 C
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Mar 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 695923 (3)
1. Corporation Name
STAIR'S MANGEMENT, INC.



Principal Place of Business
1721 S.W. 68 AVENUE
PLANTATION FL 33317
US

Mailing Address
1721 S.W. 68 AVENUE
PLANTATION FL 33317
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 10440 GOLDEN EAGLE CT		26 10440 GOLDEN EAGLE CT		07/23/1981	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2115043	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 PLANTATION, FL		28 PLANTATION, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 33324		29 33324		30 33324	
Country		Country			
25 US		30 US			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
STAIR, CAROL 1721 SW 69TH AVE PLANTATION FL 33317		81 Name CAROL STAIR	
		82 Street Address (P.O. Box Number Is Not Acceptable) 10440 GOLDEN EAGLE CT	
		83	
		84 City PLANTATION FL	
		85 Zip Code 33324	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS	1.1 TITLE	DS
NAME	STAIR, CAROL C	1.2 NAME	STAIR, CAROL C
STREET ADDRESS	1721 SW 69TH AVE	1.3 STREET ADDRESS	10440 GOLDEN EAGLE CT
CITY-ST-ZIP	PLANTATION, FL 00000	1.4 CITY-ST-ZIP	PLANTATION, FL 33324
TITLE		2.1 TITLE	DS
NAME		2.2 NAME	STAIR, DARYL
STREET ADDRESS		2.3 STREET ADDRESS	10440 GOLDEN EAGLE CT
CITY-ST-ZIP		2.4 CITY-ST-ZIP	PLANTATION, FL 33324
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE: _____ 2/23/98 954-581-1200

CR2E034 (10/97)