## FILE NOW: FILING FEE IS \$61.25

## NONPROFIT CORPORATION

FLORIDA DEPARTMENT OF STATE

	$\Gamma I L E I$	J
Jun 23	1998	8:00am
Secre	etary c	of State

CH CD

ANN	UAL REPORT			Secretary of State  DIVISION OF CORPORATIONS			NS 	Secretary of State
DOCU 1. Corporati	IMENT #	18 FM	so S	soci	in g	1	26	
Principal Plan	t X L Y:		Mailina Aa	ldroos			<del></del>	
Talliciparria	Ce or Dusiness	.75	Mailing Ad くえぬ	11 (1)	-T/D	1	К	
					^			3. Date Incorporated or Qualified SCOPTEMBER 13, 1978
			True!	シントル	1 4 P	<b>ل</b> ـــ,		4. FEI Number 1926 180 Applied For Not Applicable
2. Principal F	Place of Business	A = A	2a. Mailing 26	190	N.b	7 -	J.S.H.	5. Certificate of Status Desired Section 88.75 Additional Fee Required
Suite, Apl	#, etc.		Suite, A	Apt #, etc.			•	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees
City & Sta	te		16×8:	State	x 181	<u> </u>	12	7. Is this nonprofit corporation a homeowners association?
Zip	Co.	intry	28 Zip	- 31 - 4	Cor	intry	100	8. This corporation owes or has paid the current year Intangible
24	25	dress of Current F	29 3	3211	30 13	RO	MAK	Personal Property Tax due June 30. Yes No
A 11				gent	·	81	Name	10. Name and Address of New Registered Agent
HIP	ert W	LIKKLI				82	Street Add	dress (P.O. Box Number is Not Acceptable)
, 7s	20 Nm	MN ST						
DI	antation	r.FL3	3317			83		·
ט ר.	MACTIO !	111				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of S	ections 617.0502 a	ind 617.1508,	Florida Stat	utes, the at	oove-r	named cor	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and a	accept the obligation	ons of Section	617.0503	Florida Stat	utes.	не со рога	and to board of directors, i finitely accept the appointment as registered
SIGNATURE	Signature Typed or printed a	ame of registeric agent a	od title if poplication	n (h	OTE Registered	d Agent	signature requ	uired when reinstaling) DATE
12.	,	OFFICERS AND D			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE				☐ DELETE	1.1 TO			MELBA WIKAT Change Addition
NAME					1.2 NA		,	7520 NW 7th St P.D
STREET ADDRESS					1		DDRESS -	Plantation, FL 33317
CITY-ST-ZIP TITLE	<del> </del>			DELETE	1.4 CI 2 1 TII	IY-SI-	ZIP	Thanna Addition
NAME	1		,		2 2 NA		1	Jane Tame 22523 SW 65 terrace VD
STREET ADDRESS							ODRESS	22523 SW 65 terrace VD
CITY - ST - ZIP						TY · ST -		Bora Raton FL 33428
TITLE				DELETE	3 1 TIT	LE	-	Change Addition
Name					3 2 NA	ME	'	Myran Colonia
STREET ADDRESS					, 33 ST	REET AC	DDRESS	15185W 148 121 MCC 113
CITY - ST - ZIP				05/57=		1Y - ST -	ZIP	Pembroke fines, H 33021
TITLE			,	DELETE	4 1 111			Myran Goldin 1518 SW 148 Terrace TID Pembroke Pines FL 33027 Susan DeBusk 6202 SW565+ Wami, FL 33155
NAME Street Address					4 2 N			202 SW565+ SID \$66
CITY-ST-ZIP						REET AD 'Y-ST-1	JUNESS J	100 m & f1 22 50
TITLE	<del></del>			DELETE	5.1 TIT		ZIP	Change Addition
NAME			•	_ · · <del>-</del>	5.2 NA		]	- Stange - Problem
STREET ADDRESS						reet ad	DDRESS	
CITY-ST-ZIP			_			Y-ST-2	· · · · · · J	
TITLE			I	DEVETE	6 1 TIT			SOCO2570255
NAME					6 2 NA	ME		-06/24/9801003008
STREET ADDRESS					6351	REET AD	DRESS	"UGF 617 30"" BLBB5"" BBB

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 supplier ental 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 trusted empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on the attachment with an address.

**SIGNATURE:**