FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Søndra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

COLODNY, FASS & TALENFELD, P.A.

FILED Apr 14 1998 8:00am Secretary of State



						_			
Principal Place	e of Business	Mailing Address				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2000 W COM	MERCIAL BLVD.	2000 W COMMERCIAL BLVD							
232		232			DO NOT WRITE IN THIS SPACE				
I IIS	ALE FL 33309	FT. LAUDERDALE FL 33309 US			3. Date Incorporated or Qualified				
\		•	•			03/03/1982			l l
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		TA	pplied For
21		26				59-2170069	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.					П		Additional
22		27				5. Certificate of Status Desired	<u></u> _	Fee R	equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	⊢ ¬			This corporation owes or has paid the current year Intangible			
24	25	29	30			Personal Property Tax due Jur			No No
	9, Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New F	egistered A	Beur	
FASS, JOEL S					Mairie				
2000 W COMMERCIAL BLVD STE 232			ĺ	82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
FT LAUDERDALE FL 33309			ŀ	83					
[[
			ſ	84	City		FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Fiorida 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 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE									
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF			
TITLE	PD	☐ DELETE	1.1 111	LE			Į.	Change	Addition §
NAME	FASS, JOEL S	TE 400	1.2 NA						5
STREET ADDRESS	PT LAUDEDOALE EL			1.3 STREET ADDRESS		·			[
CITY-ST-ZWP		T on the	1.4 CIT		T-ZIP		 ₇	T Observed	
TITLE	COLODNY MICHAEL	☐ DELETE	2.1 717				ı	Change	Addition C
HAME	COLODNY, MICHAEL 2000 W COMMERCIAL BLVD STE 232			2.2 NAME					
STREET ADDRESS	FT LAUDERDALE FL	IL FOE		2.3 STREET ADDRESS 2.4 CITY - ST - ZIP					
CITY-ST-ZIP TITLE	STD	☐ DELETE	2.4 CI 3.1 TIT		I-ZIP		 7	Change	Addition
NAME	TALENFELD, HOWARD M.	ר הנורונ			J		,		T Vagurion
STREET ADDRESS	2000 W COMMERCIAL BLVD S	TF 232	3.2 NA		ADDOCOC				1
1	FT LAUDERDALE FL			3.3 STREET ADDRESS 3.4. CITY - ST - ZIP					
CITY-ST-ZIP TITLE	r r ter tipre ter ter Hele 1 to	DELETE	4.1 TIT		1-28		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			4. 2 NA		ſ		•		
STREET ADDRESS					ADDRESS				
CITY+ST-ZIP			4.4 CIT						
TITLE		DELETE	5.1 TIT	_	1-211			Change	Addition
NAME			5.2 NA				•		
STREET ADDRESS					ADDRESS				
CITY-ST-ZWP			5.4 CIT						1
TITLE		DELETE	6.1 TIT				Ţ	Change	Addition
NAME			6.2 NA	ME		4. g.			
STREET ADDRESS			6.3 ST	REET #	ADDRESS	*			\
CITY-ST-ZIP			6.4 CIT	Y-ST	T- 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 Reporation or the receiver of trusted employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 at all chapter 607.

SIGNATURE:

4/8/98

(954) 492-4010