## 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

•	MENT # F8159 FIT FOUNDATIONS INC.	97 (9)			
Principal Place	of Business	Mailing Address			1111
P.O. BOX 252		P.O. BOX 252			
HEWLEETT NY 11559		HEWLEETT NY 11559		DO NOT WRITE IN THIS OR OF	
				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				05/17/1982	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied	l For
न		26		13-5398600 Not App	olicable
Sulte, Apt.	#, <b>6</b> tc.	Suite, Apt. #, otc.		\$8.75 Additi	
2		27		Fee Require	
City & State	}	City & State		6. Election Campaign Financing \$5.00 May  Trust Fund Contribution Added to Fereign Added to	
Zip	Country	28 Zip	Country	Trust Fund Contribution Added to Fer  8. This corporation owes or has paid the current year Intangit.	
4	25	29	30	Personal Property Tax due June 30. Yes X No	
<u></u>	9. Name and Address of Cure		1001	10. Name and Address of New Registered Agent	
AP/ MIA	)1 COLLINS AVENUE ARTMENT AB18 MI BEACH FL 33139		83 5	Iress (P.O. Box Number is Not Acceptable)  100 N.E. 2 AVE  NIRM), GURLOI 33/37  APT 602 FL 85 Zip Code 33/32	
11. Pursuant t office or re	o the provisions of Sections 607.0 gistered agent, or both, in the Sta	9502 and 607,1508, Florida Statuti ate of Florida, Such ch <b>ange w</b> as a	es, the above-named corp authorized by the corpora		
agent. 1 ar	n familiar with, and accept the ob- Signature typed or plented harner of respected of	agent and the diagnostable (NOT	orida Statutes. E Registered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registered when reinstating)  DATE	istered stered
agent. 1 ar SIGNATURE. 12.	n familiar with, and accept the ob- Signature typed or plented harner of respected of	agentared Literapposable. (NOII AND DIRECTORS	orida Statutes.  i Begistered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered
signature.  12.	in familiar with, and accept the ob- Signature, typical or pented name of requirement. OFFICERS A	agent and the diagnostable (NOT	orida Statutes. E Registered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered
Bgent, 1 ar SIGNATURE  12. TITLE NAME	n familiar with, and accept the ob- Signature typed or plented harner of respected of	agentared Literapposable. (NOII AND DIRECTORS	orida Statutes.  1 Begistered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	in familiar with, and accept the ob- Signature, typical is pleated name of regulared OFFICERS A P RUBINSTEIN, BERNARD	agentared Literapposable. (NOII AND DIRECTORS	i Bogistered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered
BGONATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	in familiar with, and accept the ob- Signature typed a pented name of regularist OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE	agentared Literapposable. (NOII AND DIRECTORS	i Bogistered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired whon reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered
BGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA	age ni and title ( बंगूकर कोर्क ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	i Bogistered Agent signature requi	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired whon reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered 12 Addition
AGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	age ni and title ( बंगूकर कोर्स (NOI) AND DIRECTORS	i Bogistered Agent signature regul  13. 11 TITLE 12 NAMI 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAMI 2.3 STREET ADDRESS	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired whon reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	istered stered 12 Addition
BGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS CITY-\$1-ZIP	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA	oligations of Section 607.0505, Fix  agent and tilled approvable. (NOTI  AND DIRECTORS  ☐ DELETE	i Bogistered Agent signature regul  13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 City-St-ZiP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 City-S1-ZiP	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registive when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change	12 Addition
AGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	age ni and title ( बंगूकर कोर्स (NOI) AND DIRECTORS	i Bogistered Agent signature requi 13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registive when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change	istered stered 12 Addition
BGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	oligations of Section 607.0505, Fix  agent and tilled approvable. (NOTI  AND DIRECTORS  ☐ DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST- ZIP 3.1 TITLE 3.2 NAME	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registive when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change	12 Addition
AGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	oligations of Section 607.0505, Fix  agent and tilled approvable. (NOTI  AND DIRECTORS  ☐ DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registive when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change	12 Addition
BGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS CITY-\$1-ZIP	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	oligations of Section 607.0505, Fix  agent and tilled approvable. (NOTI  AND DIRECTORS  ☐ DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST- ZIP 3.1 TITLE 3.2 NAME	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change	12 Addition Addition
BGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentiand Effect approache. (NOT)  AND DIRECTORS  DELETE  DELETE	i Bogistered Agent signature requi 13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registived when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change	12 Addition Addition
BIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentiand Effect approache. (NOT)  AND DIRECTORS  DELETE  DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY - ST - ZIP  4.1 TITLE	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registived when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change	12 Addition Addition
BIGHT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentiand Effect approache. (NOT)  AND DIRECTORS  DELETE  DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY - ST - ZIP  4.1 TITLE  4.2 NAME	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registived when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change	12 Addition Addition
BIGHATURE  12.  117.  11	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentiand Effect approache. (NOT)  AND DIRECTORS  DELETE  DELETE	i Bogiste ed Agent signature requil  13.  11 TITLE  12 NAME  1.3 STREEL ADDRESS  1.4 CITY - ST- ZIP  2.1 TITLE  2.2 NAME  2.3 STREEL ADDRESS  2.4 CITY - ST- ZIP  3.1 TITLE  3.2 NAME  3.3 STREEL ADDRESS  3.4 CITY - ST- ZIP  4.1 TITLE  4.2 NAME  4.3 STREEL ADDRESS	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change  Change	12 Addition Addition
BIGHNATURE  12.  117.  1	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentianal Effect Approvable. (NCTIAND DIRECTORS DELETE)  DELETE  DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE  12 NAME  1.3 STREEL ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREEL ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREEL ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREEL ADDRESS  4.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREEL ADDRESS  4.4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change  Change	12 Addition Addition
BIGHT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	in familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentianal Effect Approvable. (NCTIAND DIRECTORS DELETE)  DELETE  DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE  12 NAME  1.3 STREEL ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREEL ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREEL ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREEL ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREEL ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registired when reinstating)  DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change  Change	12 Addition Addition
BIGONATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	n familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentianal Cited Approvides (NCI) AND DIRECTORS DELETE  DELETE	i Bogiste ed Agent signature requi  13.  11 TITLE  12 NAME  1.3 STREEL ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREEL ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREEL ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREEL ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREEL ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREEL ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREEL ADDRESS  6.4 CITY-ST-ZIP	poration submits this statement for the purpose of changing its regisition's board of directors. I hereby accept the appointment as regisized whon reinstating)    DATE	12 Addition Addition Addition
BIGONATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	n familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentianal Effect Approvable. (NCTIAND DIRECTORS DELETE)  DELETE  DELETE	i Bogiste ed Agent signature requil  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE	poration submits this statement for the purpose of changing its regisition's board of directors. I hereby accept the appointment as regisized whon reinstating)    DATE	12 Addition Addition Addition
BIGONATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	n familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentianal Cited Approvides (NCI) AND DIRECTORS DELETE  DELETE	I Bogistered Agent signature requi  13.  11 Title  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-S1-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-S1-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  3.4 CITY-S1-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-S1-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-S1-ZIP  6.1 TITLE  6.2 NAMF	poration submits this statement for the purpose of changing its regisition's board of directors. I hereby accept the appointment as regisized whon reinstating)    DATE	12 Addition Addition
BGONT. 1 AIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	n familiar with, and accept the ob- Signature typed or pented name of regularist.  OFFICERS / P RUBINSTEIN, BERNARD 1514 MOFFIT AVE HEWLETT NY ST RUBINSTEIN, INA 1514 MOFFIT AVE	Ingentianal Cited Approvides (NCI) AND DIRECTORS DELETE  DELETE	i Bogiste ed Agent signature requil  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE	poration submits this statement for the purpose of changing its regisition's board of directors. I hereby accept the appointment as regisized whon reinstating)    DATE	12 Addition Addition Addition

**FILED** 

May 12 1998 8:00am

Secretary of State