## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** ELORIDA DEPARTMENT OF STATE Jan 26 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 (1)DOCUMENT # F85896 DAVID TEITEL CPA, P.A. Principal Place of Business Mailing Address 630 US HWY #1, STE 303 NORTH PALM BEACH FL 33408 630 US HWY #1/STE 303 SOUIRES BLDG. SUITE 216 DO NOT WRITE IN THIS SPACE NORTH PALM BEACH FL 33408 3. Date Incorporated or Qualified 06/18/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 38 ENINBURGH 38 EDINBURGH DR 59-2195248 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing P.B. GAR P.B. GAR 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 33418 24 25 29 usPersonal Property Tax due June 30. M Yes **∑** No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TEITEL, DAVID, CPA DAVID TEITE 630 U.S. HIGHWAY 1 SUITE 303 Street Address (P.O. Box Number is Not Accep 82 -N: PALM BEACH FL 33408 83 38 EDINBURGH DR. P.B. GARDENS FL. 33418 GARDENS 33418 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change PD TITLE PD 1.2 NAME TEITEL, DAVID NAME DAVID TEITEL 630 U.S. HIGHWAY 1 28 EDINDURGH DR 1.3 STREET ADDRESS STREET ADDRESS 38 EDINBURGE DR. B.GARDENS FL 33418 1.4 CITY-ST-ZIP CITY - ST- ZIP NORTH-PALM BEACH FL B. GARDENS TITLE DELETE 2.1 TITLE Change Addition 2.2 NAME NAME 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP TIT! F DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Change Addition 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 Block 12 or Block 13 if changed, or on an attachment with an address.

REQUIRED

1-15-98

SIGNATURE: