FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

| | | 55 1 |
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DOCUMENT #

(2)

| Principal Place of Business Mailing Address 300 S. PINE ISLAND RD. 300 S. PINE ISLAND RD. | | | | | | | | | |
|---|--|-----------------------|--|---------------------------------------|--|--|--------------|---------------|--------------------------|
| SUITE 110 SUITE 110 PLANTATION FL 33324 PLANTATION FL 33324 | | | | | Date Incorporated or Qualified 3a. Date of Last Report | | | | |
| | | | | | | 07/16/1982 | U | 3/23/19 | 195 |
| | ace of Business | 2a. Mailing Address | | | | 4. FEI Number 59-2389947 | | | Applied For |
| 21 | h ata | 26 Suite Act # ate | ······································ | · · · · · · · · · · · · · · · · · · · | | 39 2009341 | | | Not Applicable |
| Suite, Apt. # | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | 5 Additional Required |
| Crty & State | <u></u> | City & State | | | | 6. Election Campaign Financing | | \$5.00 May Be | |
| 23 | | 28 | | | | Trust Fund Contribution | | | od to Fees |
| Zıp | Country | 7 _{(P} | | Country | | 8. This corporation has liability for | | k under s | 199.032, |
| 24 | 25 | 29 | 30 | | | | □No | | |
| | 9, Name and Address of Curr | ent Registered Agent | ***** | 81 | Name | 10. Name and Address of New F | registered A | igent | |
| EIGUHE | r, steven | | | 61 | | | | | |
| | n, sieven VW 13TH ST. | | | 82 | Street Ad | dress (P.O. Box Number is Not Acceptat | ole) | | |
| | ATION FL 33329 | | | 83 | · · · · · | | | | |
| | | | | | | | | | |
| | | | | 84 | City | | FL | 85 Z | ip Code |
| 12. | Squar, re-lyned or printed name of registerest ag OFFICERS A | UND DIRECTORS DELETE | | ered Age 3. 1 TiTL€ | it signature req | ned was reputatings ADDITIONS/OHANGES TO OFF | | DIRECTO | ORS IN 12 |
| NAME | FISCHER, HARRY | ☐ DETE | | . I HIFLE .2 NAME | | | L |] Glange | [] Addition |
| STREET ADDRESS | 10140 NW 13TH ST. | | | | ADDRESS | | | | |
| CITY-S1-ZIP | PLANTATION FL | | | .4 CITY - 5 | | | | | |
| TITLE | 70 | ☐ DELETE | | 1 TITLE | ,, | | |] Change | Addition |
| NAME | FISCHER, STEVEN | | 2 | 2 NAME | | | | | |
| STREET ADDRESS | 10140 NW 13TH ST | | 2 | 3 STREET | ADORESS | | | | |
| CITY-ST-ZIP | PLANTATION FL | | | 4 CITY - S | ST-ZIF | and the second s | · <u>-</u> | = | |
| TITLE | | ☐ DELETE | | 1 TITLE | | | L |] Change | Addition |
| NAME | | | | .2 NAME | | | | | |
| STREET ADDRESS | | | _ I | | I ADDRESS | | | | |
| CHY-ST-ZI? TITLE | | DELETE | | 4 CHY - S 1 TITLE | 21-211 | | | 7 Change | ☐ Addition |
| NAME | | | | 2 NAME | | | • | | Name of the last |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZI2 | | | | 4 CITY - S | 1 | | | | |
| TITLE | | ☐ DELETE | 5 | 1 TITLE | | | | Change | ☐ Addition |
| NAME | | | 5 | 2 NAME | | | | | |
| STREET ADDRESS | | | 5 | 3 STHEE | ADDRESS | | | | |
| City-St-Zi ^o | | | | 4 CHY-5 | ST-712 | | | | — |
| TITLE | | □ DELETE | | 1 TITLE | | | |] Change | Addition |
| NAME | | | - 1 | 2 NAME | | | | | |
| STREET ADDRESS | 1 | | 6 | 3 STREE | I ADDRESS | | | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 director of the corporation or the receiver or trusted 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:

Steven Fischer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(954) 370-0300

Daytime Phone #