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

DOCUMENT # F9300001264 (1)

FALK ASSOCIATES MANAGEMENT ENTERPRISES, INC.

FILED
May 21 1998 8:00am
Secretary of State

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District Discourse of Discourse					I TOURIOU PRIO TEREN TEREN TEREN DUCKS WORLD WOLLS WORLD REDIE FROM DELINE BLUE HODE				
Principal Place of Business Mailing Address 5335 WISCONSIN AVE N.W. 5335 WISCONSIN AVI WASHINGTON DC 20015 WASHINGTON DC 20									
***************************************	7 00 20010	WASHINGTON D	0 20010			DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualified 04/08/1993			
2. Principal F	Place of Business	2a. Mailing Addre	ess			4. FEI Number		pplied For	
21		26				36-3810092	N	lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	
22		27				or community of change bearing	Fee P	Required	
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		to Fees	
Zip	Country	Z _i p	-	untry	•	This corporation owes or has paid the cr		_ ·	
24	25 9. Name and Address of Curre	29 int Registered Agent	30	т-		Personal Property Tax due June 30. 10. Name and Address of New Registered		No	
C.	T CORPORATION SYSTEM			81	Name	10. Name and Addition of their Hegisteres	- Agoin		
	51 WEST BROWARD BLVD.								
	ANTATION FL 33324			82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
, ,	WITH 1 2 33524			83	·				
				84	City	FI	85 Zip	Code	
office or r	registered agent, or both, in the Stati	e of Florida. Such ch an	ge was authorize	ed by	the corpor	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing pointment as	its registered s registered	
agent. I s	ı m fam iliar with, and accept the obliq	gations of, Section 607.0	0505, Florida Sta	alules	3.	, , ,		•	
SIGNATURE	Signature, typind or printed manie of registered as	real and bit of an decide	(NCI) C. Popustor	od Aar	ont executive rea	pered when reinstating) DATE			
12.		ND DIRECTORS	13.		in signature req	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
TITLE	DCP			IITLE		/ IDDIVIOUS INTO CONTINUE TO C	Change	Addition	
NAME	FALK, DAVID B	12 N/		NAME				_	
STREET ADDRESS 5335 WISCONSIN AVE., N.W.				1.3 STREET ADDRESS					
CITY-ST-ZIP	WASHINGTON DC 20015			DITY-S					
TITLE	VPS	DE	LETE 211				☐ Change	Addition	
NAME	POLK, CURTIS J		2.21	NAME			_		
STREET ADDRESS	5335 WISCONSIN AVE., N.W	Ι.			ADDRESS				
CITY-ST-ZIP	WASHINGTON DC 20015			CITY - S					
TITLE	VP	☐ DE		ITLE			☐ Change	Addition	
NAME	HIGGINS, GERALD M.		3.2 1	NAME					
STREET ADDRESS	5335 WISCONSIN AVENUE,	NW, #850	3.3 5	TREET	ADDRESS				
CITY-ST-ZIP	WASHINGTON D		3,4.	CITY-S	iT-ZIP				
TITLE		☐ DE					Change	Addition	
NAME			4.2	NAME					
STREET ADDRESS			4.3.5	TREET	ADDRESS				
CITY-ST-ZIP				IIY-S	T-ZIP				
TITLE		DEI	LETE 5.17	ITLE			Change	Addition	
NAME			5.2 1	IAME					
STREET ADDRESS			5.3 \$	TREFT	ADDRESS				
CITY-ST-ZIP			5.4 (ITY-S	T-ZIP				
TITLE		☐ DEI	LETE 6.1 T	TLE			Change	Addition	
NAME			62 N	IAME					
STREET ADDRESS			6.3 \$	TREET	ADDRESS				
CITY-ST-ZIP				CITY-S					
14 I boroby	and by that the information are necessarily	with this films does not				in Continu 110 07/9/// Florido Statutos I further a		. :	

4. 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 corporation or the receiver or trustee 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.

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