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 # F94000004999 (8)

FNP-BOCA, INC.

FILED Feb 11 1998 8:00am Secretary of State

Principal Plac	e of Busines	55	Mailing .	Address						1911) 48 111 49 111		D/10 1917 1987	
1535 N. DAYI CHICAGO IL			CHICAG	1535 N. DAYTON CHICAGO IL 60622					DO AIGH MOIT	E INTERNO	DAGE		
US			05	US				-	DO NOT WRIT		PACE		
									 Date Incorporated or Gualified 09/27/1994 				
2. Principal P	lace of Busi	ness	2a. Mailing Address					4. FEI Number			pplied For		
21			26					36-3976184		N	ot Applicable		
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional	
22			27	_ 					er obtained of other boards		Fee P	lequired	
City & State	е		City	City & State					6. Election Campaign Financing	_	\$5.00	May Be	
23			28						Trust Fund Contribution		Added	to Fees	
Zip		Country	Zib	Zip Cou			•	8. This corporation owes or has paid the current year Int					
24		25	29								MO No		
		and Address of Currer	nt Registered	Agent				·································	10. Name and Address of New R	egistered A	gent		
		ATION SYSTEM				81	Name						
1200 SOUTH PINE ISLAND ROAD							Street A	Address	ess (P.O. Box Number is Not Acceptable)				
PL	antation	FL 33324											
	•					63]	
						84	City				85 Zip	Code	
		·								FL			
 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 in office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 											its registered registered		
agent. i a	m tam ıllar w	ith, and accept the oblig	ations of, Sect	ion 607.0505, Fic	orida Sta	lutes	5 ,						
SIGNATURE	Signature turno	or printed name of registered age	est and title it englis	alde (NOT)	Pagistara	d Acc	n) eincolue r	toon incide	when reinstating)	DATE			
12.	Olgradio, typic	OFFICERS AN			13.	ii Age	in signature i	required v	ADDITIONS/CHANGES TO OFFI		DIBECTO	RS IN 12	
TITLE	DP			DELETE	1.1 TI	TLE	····				Change	Addition	
NAME	ROSEN	STEIN, ANDREA			1.2 N	AMF					_ *		
STREET ADDRESS	4505 NI DAVIONI						1.3 STREET ADDRESS						
CITY-ST-ZIP	CHICAG					11Y - S	1						
TITLE	DVST			DELFTE	2.1 7		1-211				Change	Addition	
NAME		STEIN, STEVEN J			2.2 N		İ			'			
STREET ADDRESS		DAYTON					ADDRESS						
	CHICAG												
CITY-ST-ZIP TITLE				DELETE	3.1 TI		T-71P				Change	Addition	
NAME					3.2 N/					!	Driange		
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STREET ADDRESS							ADDRESS						
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NAME				L DECETE							—1 AnaniAe	AUUILIUII	
1					4 2 N								
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NAME .					5.2 N/		4Doneses				ペブ	1,1198	
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TITLE				- Deceit	6.1 TI		İ		20000242	egar: d	Change	☐ Addition	
NAME					6.2 NA				-02/13/98010		1		
STREET ADDRESS							ADDRESS		***150.00	and the state for the state of	•		
CITY-ST-ZIP					6.4 CI	1Y-S1	r-ZIP		4-4-4-1 AO * AO				

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 eath; 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 13 if changed, or on an attachment with an address.

CICHATURE.

CR2E034 (10/97