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 #

FILED Feb 11 1998 8:00am Secretary of State

II OUIPOIL	TURE OPPORTUNITIES CO		(1)			
Principal Pl	ace of Business	Mailing Addres	<u> </u>			
150 EAST	58TH ST., 16TH FL. K NY 10155	150 EAST 58T	150 EAST 58TH ST., 16TH FL. NEW YORK NY 10155			
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
						01/21/1997
2. Principa	Place of Business	2a. Mailing Add	ress			4. FEI Number Applied For
21		⊢	26			59-1882664 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			4 CO 75 1 1 1111
22		27				5. Certificate of Status Desired Fee Required
City & SI	ale	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zφ	ļ ₁	Country L		8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Cu	29	30	L		Personal Property Tax due June 30. Yes No
		·-·-		81	Name	10. Name and Address of New Registered Agent
	NATIONAL CORPORATE RESEA	INCH, EID., INC.				
	1406 HAYS ST., STE. 2 FALLAHASSEE FL 32301			82	Street A	Address (P.O. Box Number is Not Acceptable)
	ALLANASSEE PL 32301			83		
				84	City	FL 85 Zip Code
11. Pursuar	nt to the provisions of Sections 607.	0502 and 607.1508, Flor	da Statutos, t	he abovo	-named	corporation submits this statement for the purpose of changing its registered
office o agent. I	r registered agent, or both, in the S Fam familiar with, and accept the of	itate of Florida. Such cha bligations of Section 607	nge was autho .0505. Florida	orized by Statutes	the corp	poration's board of directors. I hereby accopt the appointment as registered
SIGNATURE		0				
	Signature, lyped or printed name of registere		(NOTE Reg	gistered Age	rd signature	roguered whee reinstaling) (DATE
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIFLE	DP	[] D	ELETE	1.1 TITLE	ļ	Change Addition
NAME	MARCH, A. FRED	J E1		1.2 NAME		
STREET ADORES	s 150 EAST 58TH ST., 16TH NEW YORK NY 10155	1 FL.		1.3 STREET		
CITY-ST-ZIP	DV DV			14 CITY-ST 21 TITLE	- ZIP	Change Addition
NAME	MARCH, FLORA	U ''		2.2 NAME	ł	Cularige Nutrition
STREET ADDRESS	404 C16P C4001 AT 4400	4 E)		2.3 STREET.	ADDDESS	
CITY-ST-ZIP	NEW YORK NY 10155	, , <u></u>		2 4 CHY-S		
TITLE	08	D		3.1 TITLE		Change Addition
NAME	DADY, ROBERT E		1	3.2 NAME		
STREET ADDRESS			ļ	3.3 STREET A	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131			3.4 CITY-S	T-ZIP	
TITLE		□ D		4.1 TITLE		☐ Change ☐ Addilion
NAME				4 2 NAME	ľ	
STREET ADDRESS	s (4.3 STREET /	ADDRESS	
CITY-ST-ZIP				4.4 CITY - ST	· ZIP	
TITLE		□ D	CLE1E	5.1 TOLE		Change Addition
NAME			ľ	5.2 NAMI		
STREET ADDRESS	S			5.9 STREET A	ADDRESS	
CITY-ST-ZIP				5.4 CITY - ST	- Z (P	
TITLE		□ Đ		6.1 TITLE		Addition
NAME				6.2 NAME	İ	0000024298011 Page 14 Addition -02/13/98-01015-023
STREET ADDRESS	S			63 STREET A		***158.75
CITY-ST-ZIP				6.4 CITY-ST	· ZIP	acceptaint and the second and the se

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 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 in the an address.