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PROFIT CORPORATION ANNUAL REPORT 1998

SIGNATURE:



Secretary of State DIVISION OF CORPORATIONS

FILED Mar 13 1998 8:00am Secretary of State

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ADDIC1			90 (9)							
	TION ASSESSMENT CENT	ER, INC.						11 12 13 14 15 15 15 15 15 15 15		(1 111 61 11 (8 9] 1411 61 1 183
Principal Place	e of Business	Mailing A	ddress			1 0 0 1 1 1 1 1 1 1	MER ENGARE MUNICIPAL MUNICIPAL M	1941) 94 411 59 1	INT HUNDE INTE	IDIA BRA HOTI
3 SEAWARD	CT.	3 SEAWA	ARD CT.			j				
	G HARBOR NY 11724		COLD SPRING HARBOR NY 11724				DO NOT WRITE IN THIS SPACE			
						3. Date Incorpora		E IN THIS	SPACE	
						04/11/1997				
2. Principal P	Place of Business	2a. Mailing	Address			4. FEI Number				Applied For
21		26				11-32555	65			Not Applicable
Suite, Apt.	#, etc.	Suite,	Apt. #, øtc.			5. Certificate of S	atus Desired		+	Additional
City & Capt		27 City 8	Ctuto							Required
City & State	e.	28	State			6. Election Campa Trust Fund Con				0 May Be 1 to Fees
Zip	T Country	Zip		Country	у	8. This corporatio				
24	25	29		30	•		rty Tax due Jun			No
	9, Name and Address of Curre	nt Registered A	gent			10. Name and Add	iress of New R	egistered	Agent	
	LDER, CINDY			81	Name					
	00 GALT OCEAN DR. #2504			82	Street A	ddress (P.O. Box Numbe	is Not Accepte	ible)		
FĨ.	. LAUDERDALE FL 33308			83			·····			
				63	<u>'</u>					
				84	City			FL	85 Zij	Code
11. Pursuant f	to the provisions of Sections 607.05	02 and 607 1508	Florida Statuti	es the abov	e-named c	corporation submits this st	atement for the	DUITDOSE O	f changing	its registered
TIT I G COUCH II	TO THE PROPERTY OF EASTERNANCE CONTROL	CI CELLET CALL TO THE							naintment s	o mintare d
office or re	registered agent, or both, in the Slate	e of Florida, Suct	i change was a	authorized b	y the corpo	oration's board of director	s. I hereby acce	ept the app	pomment s	is registered
	to the provisions of Sections 607.05 registered agent, or both, in the State or familiar with, and accept the oblig	e of Florida, Suct gations of, Sectio	n change was a n 607.0505, Flo	authorized b orida Statute	y the corpo	oration's board of director	s. I hereby acce	ept the app	pomment s	is registered
SIGNATURE	registered agent, or both, in the State im familiar with, and accept the oblig Signature, typed or proted connect ingolesed in					oration's board of director	s. I hereby acce	DATE	pomment :	is registered
SIGNATURE	Signature, typest for printed ratios of legislated in		ile (NOF	t Registered Ag		required when reinstating) ADDITIONS/CHA	·	DATE	D DIRECTO	DRS IN 12
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