## 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

## **FILED** Mar 10 1998 8:00am Secretary of State

Principal Place of Business	1. Corporation	n Name	# P97 Y HOLDING		UL	)4084 (O)	•					i abbiebā pie abie 1880 asen basa sāra sāra	<b>.</b>	(Å)(( 848) IÅSA	
Principal Place of Business															
## HOLLYWOOD FL 33021  ## HOLLYWOOD FL 33021  ## HOLLYWOOD FL 33021  ## Applied For APPLED FOR 65 - 0.7812.89  ##	Principal Place of Business Mailing Address											T TOOLIDO TARB TOLIF ISOOM ODIA ODIA OOMA OOMA	DENT DENDN DIFON 1	10141 0101 F001	
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2. Principal Place of Business 2. Mailing Address 4. FEI Number 65—07.812.89   Applied For 25   Sulto, Apt. #, etc.   S. Certificate of Status Desired XIXX 58.75 Additional Fee Required City & State   City & State   City & State   Section Companying Financing   Section Se						•					2		STACE		
2. Principal Place of Business   2. Mailing Address   4. FEI Number   APPLIED FOR 65-0781289   Not Applicable										1	<b>J</b> .				
Suite, Apl. #, etc.  Suite	2. Principal P	lace of Busin	ness	• • • • • • • • • • • • • • • • • • • •	2a. Mailing Address						4.			pplied For	
Sulto, Apt. #, etc.    Sulto, Apt. #, etc.   Sulto, Apt. #, etc.   Sulto, Apt. #, etc.   Scriptificate of Status Desired XXX   \$8,75 Acditional Fee Required City & State   City & State   City & State   City & State	<b>_</b> , '					26						-APPLIED FOR- 65-07812			
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Zip	<del></del> _	е													
28			Country												
S. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent			<del></del> -			h '			untry			•			
STOTZER, THEODORE R 200 \$. PARK RD \$200 HOLLYWOOD FL 33021  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statules  SIGNATURE  Signalus-bynd or printed name of regulated agent and sic if applicable. [NOTE: Registered Agent signature required when rehistating) DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PSTD  SIRRET ADDRESS  200 S. PARK RD \$200  13. STREET ADDRESS  HOLLYWOOD FL 33021  TITLE  DELETE  21 TITLE  DELETE  21 TITLE  V. Change XX Addition  Addition  Addition  TITLE  DELETE  3.1 TITLE  ADDITIONS/CHANGES TO OFFICER AND DIRECTORS IN 12  Change Addition  Addition  TITLE  ADDITIONS OF PARK RD \$200  1.3 STREET ADDRESS  CON S. Park RD \$200  1.4 City ST. Zip  Hollywood FL 33021  TITLE  DELETE  3.1 TITLE  ADDITIONS OF PARK RD \$200  1.5 STREET ADDRESS  CON S. Park RD \$200  1.5 STREET ADDRESS  CON S. Park RD \$200  1.5 STREET ADDRESS  ADDITIONS OF PARK RD \$200  1.5 STREET ADDRESS  CON S. Park RD \$200  1.5 STREET ADDRESS  CON S. Park RD \$200  1.5 STREET ADDRESS  ADDITIONS OF PARK RD \$200  1.5 STREET ADDRESS  ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS  ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS ON S. Park RD \$200  1.5 STREET ADDRESS	24	9 Name		f Current F				1	,						
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HOLLYWOOD FL 33021  83  84 City  FL B5 Zip Code  11. 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 its registered agent, and accept the obligations of, Section 667.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 667.0505, Florida Statutes.  SIGNATURE  Signature, hynd or printed name of registered agent and tits if applicable.  INOTE: Registered Agent aigmature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PSTD  SWERDLOW, MICHAEL J  20 S. PARK RD #200  13 STREET ADDRESS  CITY-ST-ZIP  HOLLYWOOD FL 33021  DELETE  11 TITLE  DELETE  21 TITLE  DELETE  22 NAME  Stotzer, Theodore R.  23 STREET ADDRESS  200 S. Park Rd., #200  CITY-ST-ZIP  HOLLYWOOd, FL 33021  TITLE  DELETE  33 TITLE  Addition  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  HOLLYWOOd, FL 33021  TITLE  DELETE  33 STREET ADDRESS  CITY-ST-ZIP  HOLLYWOOd, FL 33021  TITLE  Change  Addition  Addition  Addition												O B			
### City #### City #### City #### City ####################################								82	Street Addres		(P.	.U. Box Number is Not Acceptable)		İ	
11. 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 its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature: (typed or printed name of registered agent and bits if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE								83							
11. 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 its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature: (typed or printed name of registered agent and bits if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE								84	City				RS Zin	Code	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent algrature required when reinstating) DATE  12.										<b>FL</b>					
Signature: typod or proted name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	office or re	egistered ag	ent, or both, in t	he State of	Florid	da. Such change was a	authoriz	ed by	the corr	corpora poration	ition 's bo	n submits this statement for the purpose oard of directors. I hereby accept the ap	of changing i pointment as	its registered s registered	
12.	SIGNATURE					10-11-11-11-11-11-11-11-11-11-11-11-11-1	- B			<del></del>					
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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 with an address.