### FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

## CORPORATION ANNUAL REPORT



### FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State

# **FILED** May 04 1998 8:00am Secretary of State

	19	98	ST. DELLE	DIVISION OF	DIVISION OF CORPORATIONS			Secretary of State				
Đ.	OCUME Corporation Na JURY SE	ENT # LECTION, (	G10677	7 (4)	ı						<b>12</b> 11 21 <b>3</b> 11 1811	
Pri	ncinal Place of I	Rusinass	<del></del>	Mailing Address						OJEN DIOJI GLELI BIRIK B		
Principal Place of Business 1201 S. OCEAN DR. 2504 S. TOWER				P.O. BOX 22-3100 HOLLYWOOD FL 33022			, DO NOT W	IDITE IN	THIS SDACE			
HOLLYWOOD FL 33019							DO NOT WRITE IN THIS SPACE  \$. Date incorporated or Qualified					
							11/12/1982					
2.	Principal Place	of Business		2a, Mailing Address				4. FEI Number		[ Ar	oplied For	
21			_	26		_		59-2240115		No	t Applicable	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desire	a [	□ \$8.75 Fee Re	Additional		
22	City & State			City & State			C Floring Compains Financia			·		
23	Ony & Oldio			28			6. Election Campaign Financi Trust Fund Contribution		\$5.00 ☐ Added	May Be to Fees		
	Zip	L c	Duntry	Zιρ	Cou	ntry	,	8. This corporation owes or h	as paid	the current year Ini	angible	
24		25		29	30			Personal Property Tax due			No No	
			ddress of Current F	iegistered Agent		81		10. Name and Address of Ne	w Regia	stered Agent		
		E, JAY	h		Ï	81	Name					
1201 S. OCEAN DR., 2504 SOUTH						82	Street Add	ess (P.O. Box Number is Not Acceptable)				
HOLLYWOOD FL 33019						63						
i						84	City			FL 85 Zip	Code	
11	. Pursuant to the	e provisions of	Sections 607.0502 a	ind 607.1508, Florida Stat	utes, the a		e-named co	rporation submits this statement for	the pur		s registered	
	office or regist agent I am fai	lered agent, or miliar with, and	both, in the State of Laccept the obligation	Florida Such change was ons of, Section 607,0505, I	s authorize Florida Stat	d by utes	y the corpora s.	rporation submits this statement for ation's board of directors. I hereby	accept ti	he appointment as	registered	
	SNATURE .										}	
	Signa	ture typed or printer	name of registered agent a			Age	ent signature requ	uired when reinstating)		DATE		
12.		OFFICERS AND DIRECTO		DELETE	13.	1.1 TITLE		ADDITIONS/CHANGES TO	DEFICE	Change	Addition	
NAS	<b>I</b>	• .	HELLE BURKE	- president	1.2 N/					ET cuando	ridultion	
STREET ADDRESS 1201 S. OCEAN DR. 25045					1.3 STREET ADDRESS		ADDRESS					
		HOLLYWOO					IT-ZIP				1	
TITL		PV		☐ DELETE	2.1 Ti					Change	Addition	
NAA	AE	BURKE, JAY	1		2.2 NJ	ME					ļ	
STR		1201 S OCE			2.3 \$1	AEET	ADDRESS					
CIT	Y-ST-ZIP	<b>HOLLYWOO</b>	D FL				ST-ZIP					
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	EET ADDRESS						ADDRESS					
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NAA				L. J. December	4.2 N					U. Ondrigo		
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	Y- \$T- ZIP				5.4 CI	_	T-ZIP			FT %.	1 1 1 1 1 1 1 1	
TITL				DELETE	6.1 71		1			☐ Change	☐ Addition	
NAA CTD	l				6.2 N/		ADDRESS				-	
	EET ADDRESS						ADDRESS				Ì	
	/-SI-ZIP	v that the inform	nation supplied with	this filma does not qualify	for the exe			n Section 119 07(3)(i) Florida Statu	res I fur	ther certify that the	information	

14. Thereby 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 informatio indicated on this annual report or supplimental 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 at attachment with an address.

SIGNATURE:

While Burke James Western or printing name or program or printing name or printing name or program or printing name or printing name or program or printing name or program or progra