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

PROFIT CORPORATION ANNUAL REPORT

1998



IT ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 18 1998 8:00am Secretary of State

| 1. Corporatio | MENT # G1601 ASSTHROUGH COMPANY | 0 (2) | | | |
|--|--|---|-----------------------------------|--|--|
| Principal Place of Business T/A SOMETHING SPECIAL 779 MAIN ST. STROUDSBURG PA 18360 | | Mailing Address T/A SOMETHING SPECIAL 779 MAIN ST. STROUDSBURG PA 18360 | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/24/1982 | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | Applied For |
| Suite. Apt. #, etc | | 26 Suite, Apt. # , etc. | | 58-1491833 | Not Applicable \$8.75 Additional |
| 22 | | 27 | | 5. Certificate of Status Desired | Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Ζιp | Country | Z(p | Country | 8. This corporation owes or has paid the | |
| 24 | 25 25 Name and Address of Curre | nt Posistared Agent | 30 | Personal Property Tax due June 30. 10. Name and Address of New Register | Yes No |
| 242 FOI | ME, STEVEN N., ESQ. 4 WEST OAKLAND PARK BOU RT LAUDERDALE FL 33310 to the provisions of Sections 607.05 | | B3 B4 City | dress (P.O. Box Number is Not Acceptable) For a submits this statement for the purpos | B5 Zip Code e of changing its registered |
| SIGNATURE | | | | rporation submits this statement for the purpos alion's board of directors. I hereby accept the a | appointment as registered |
| | Signature to enterprised new of moretenities | ent and the diapple oble ID DIRECTORS | (NOTE Beginned Agent agnature req | | |
| 12. TITLE | PST | DELETI | 13. E 1.1 TITLE | ADDITIONS/CHANGES TO OFFICERS A | Change Addition |
| NAME | TREIBLE, BETTY H. | | 1.2 NAME | | |
| STREET ADDRESS | 133 CRYSTAL PARK | | 1.3 STREET ADDRESS | | |
| CITY-ST-7IP | E. STROUDSBURG PA | | 1.4 CITY - \$1 - ZIP | | |
| TITLE | | DELETI | E 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | T Sec. CT | ? 4 CITY - ST - ZIP | | |
| TITLE | | L] DELETI | 1 | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELET | 3 4. City - St - ZiP 4 1 TitlE | | Change Addition |
| NAME | | | 4 2 NAME | | |
| STREET ADORESS | | | 4 3 STREET ADDRESS | | |
| CITY-S1-ZII ² | | | 4.4 CITY - ST - 7IP | | |
| TETLE | | DELETI | | | ☐ Change ☐ Addition |
| NAME | | | 52 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-7(F) | | ······· <u></u> | 5.4 CITY - \$1 - 7IP | | |
| TITLE | | DELETI | E G1 TIRE | | Change Addition |
| NAME | | | G.2 NAME | | ļ |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | G 4 CHY-ST-ZIP | | |

14. Thereby certify that the information supplied with this filling cloes 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 suppliemental 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 frustee 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 or an other receiver with an address