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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Feb 02 1998 8:00am Secretary of State

| | MENT on Name | | | (5) | | | | | | | | |
|--|----------------------|---|----------------------|--|--------------------|---------------------------|--------------------------|---|---|------------------------------|-----------------------------------|--------------|
| IVIANAU | SEIVIEIY I H | ESOURCE ASSO | CIATE | :5, INC. | | | | | | | | |
| Principal Plac | e of Business | | | lailing Address | | | | | | | | |
| 9044 PINE SPRINGS DRIVE P.O. BOX 3266 | | | | | | | | | | | | |
| BOCA RATON | | | | BOCA RATON FL 33 | 427 | | | Į | • | | | |
| | | | | | | | | Ĺ | DO NOT WRITE IN TH | IIS SPACE | | |
| | | | | | | | | | 3. Date Incorporated or Qualified 02/17/1983 | | | |
| Principal Place of Business 1 | | | | 2a. Mailing Address | | | | | 4. FEI Number 59-2262754 | | Applied For Not Applicable | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | - | 5. Certificate of Status Desired | \$8.7 | 5 Additional | ~ |
| 22 | | | | 27 | | | | | 5. Certificate of Status Desired | Fee | Required | |
| City & State | | | | City & State | | | | | 6. Election Campaign Financing Trust Fund Contribution | 5 5 5 | 00 May Be ed to Fees | |
| Zip | | Country | | Zip | - | Country | / | _ | 8. This corporation owes or has paid the | | · · · | |
| 24 25 29 9. Name and Address of Current Registered Agent | | | | | | 0[| | | Personal Property Tax due June 30. 10. Name and Address of New Register | Yes Yes | <u> </u> | ==- |
| SC | | | it itogia | tored Agone | | 81 | Name | | it. Haite and Addicas of New Hegister | od rigigitt | | 뒥 |
| SCHNEIDERMAN, GERALD 9044 PINE SPRINGS DRIVE | | | | | | 82 | 0 | | 70.00 | <u> </u> | negrae_res_rec_ | |
| BOCA RATON FL 33428 | | | | · | | | Street Ac | Address (P.O. Box Number is Not Acceptable) | | | | - . |
| | | | | | | 83 | | | |) (.UKK_BERTYTE | | |
| | | | | | | 84 | 1 | | F | -L | îp Code 🕟 | |
| 11. Pursuant office or r | to the provision | ns of Sections 607,050 nt, or both, in the State | 22 and 6 of Flori | 07.1508, Florida St da, Such change w | atutes, as auti | the abov | e-named co the corpor | orpora ration | ation submits this statement for the purposes board of directors, I hereby accept the | e of changing appointment | g its registered as registered | 1 |
| agent. La | ım familiar witt | n, and accept the oblig | ations o | f, Section 607.0505 | i, Floric | da Statute: | 3. | | - · · · · · · · · · · · · · · · · · · · | | | |
| | Signature, typed o | r printed name of registered ag | | | NOTE: R | | ent signature rec | quired w | then refinstating) DAT | | | - F |
| 12. | DP | OFFICERS AN | ID DIREC | | | 13. | | | ADDITIONS/CHANGES TO OFFICERS | | | _ { |
| TITLE | SCHNEIDERMAN, GERALD | | | | | | | | | L Chang | e LL Additia | "- 3 |
| NAME STREET ADDRESS | | E SPRINGS DRIVE | | | | 1.2 NAME 1.3 STREET | ADDDCCC | | | | | 8 |
| 1 | | TON FL 33428 | | | | 1.4 CITY-S | | | | | | Ę |
| CITY-ST-ZIP | DST | | | DELETE | | 2.1 TITLE | 1-21- | | | Chang | e Addition | 뒤문 |
| NAME | | ERMAN, SHEILA | | | | 2.2 NAME | | | | | _ | |
| STREET ADDRESS | | E SPRINGS DRIVE | | | | 2.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | DOCA DATOM EL 22400 | | | 2.41 | | | CITY-ST-ZIP | | | | | |
| TITLE | | | | DELETE | | 3.1 TITLE | | | | ☐ Chạng | e Additio | <u> </u> |
| NAME | | | | | | 3.2 NAME | | | | | | |
| STREET ADDRESS | | | | | 1 | 3.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | | 3.4. CITY - 5 | ST-ZIP | | | <u> </u> | | ., |
| TITLE | | | | ☐ DELETE | | 4.1 TITLE | ĺ | | | | e L Addition | n |
| NAME | | | | | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | | | | | | 4.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | | 4.4 CITY-S | T-ZIP | | | 1 1 0 | - (-1 | _ |
| TITLE | | | | ☐ DELETE | | 5.1 TITLE | ļ | | | Chang | e L Addition | 1 |
| NAME | | | | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | | | | 5.3 STREET | | | | | | |
| CITY-ST-ZIP | | | | DELETE | | 5.4 CITY - S 6.1 TITLE | T-ZIP | | | Change | e 🔲 Addition | \dashv |
| TITLE | | | | TT herese | Ī | | 1 | | | La Grange | - L Mudicion | ' |
| NAME CERTE ADDRESS | | | | | | 6.2 NAME | ADDOCCO | | | | | ļ |
| STREET ADDRESS | | | | | i | 6.3 STREET | İ | | | | | ĺ |
| CITY-ST-ZIP | ertify that the | information supplied w | ith this fi | ling does not quali | fy for th | 6.4 CITY-S | | in Sec | ction 119.07(3)(i), Florida Statutes, I further | certify that t | he information | <u>-</u> · |

indicated on this annual report of 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.