FILE NOW: FILING FEE AN PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEP/ Sandra Secret	IS \$550.00 ARTMENT OF STATE B. Mortham lary of State CORPORATIONS	FILED Apr 03 1998 8:00am Secretary of State
 Corporation 	MENT # H2458 OOD ELM CORP.	8 (6)		
		Mailing Address % ALAN J. WERKSMAN 160 S.W. 12TH AVENUI DEERFIELD BEACH FL	E. #101B	DO NOT WRITE IN THIS SPACE
				10/09/1984
	ace of Business	2a. Mailing Address		4. FEI Number Applied For
1 Suite, Apt, 1	#. etc.	26 Suite, Apt. #, etc.		59-2469035 Not Applical
2	· · · · ·	27		5. Certificate of Status Desired
City & State	•	City & Stato		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zıp	Country	8. This corporation owes or has paid the current year Intangible
4	25 9. Name and Address of Currel	29 nt Registered Agent	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
160	RKSMAN, ALAN J., ESQ. SW 12 AVENUE, #101B ERFIELD BEACH FL 33442-3114	I	83	ress (P.O. Box Number is Not Acceptable)
			84 City	FL 65 Zip Code
office or re agent. I ar SIGNATURE	Signature, typed or protect name of registering agent, or both, in the Slate	o of Florida. Such change was pations of, Section 607.0505, I	s authorized by the corpora	
12. TITLE	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME STREET ADORESS CITY - ST - ZIP	SADKIN, SEYMOUR 4910 WOODLANDS BLVD. TAMARAC FL 33319	_ otten	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	
TILE NAME STREET ADDRESS	SD Cassino, Michael J., Jr. 2114 Radnor Court	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	🛄 Change 🔲 Addit
CITY-ST-ZIP NTLE NAME	JUNO ISLES FL 33408	DELETE	2. 4 CHY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	🗋 Change 🔲 Addii
STREET ADDRESS			3.3 STREET ADDRESS 3.4. CITY - ST - ZIP	
IITLE NAME STREET ADDRESS		DELETE	4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS	🛄 Change 🔲 Addit
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Change Addit
IITLE VAME STREET ADDRESS		L DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CUX, SL, 240	L Change L Addit
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.4 City-St-Zip 6.1 THLE 6.2 NAME 6.3 STREET ADDRESS	🗋 Change 🛄 Addit
CITY-ST-ZIP 14. I hereby c indicated officer or a Block 12 c	entify that the information supplied on this annual report or supplement director of the corporation or the rec or Block 13 if changed, or onyan atta	with this filing does not qualify lat annual report is true and a coiver or trustee empowered t ackrigory with an address.	64 CITY-ST-ZIP for the exemption stated in ccurate and that my signat to execute this report as red	n Section 119.07(3)(i), Florida Statutes. I further certify that the informati- ure shall have the same legal effect as if made under oath; that I am an quired by Chapter 607, Florida Statutes; and that my name appears in