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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H30455

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FILED
Jan 26 1998 8:00am
Secretary of State

ROBERT ULLMAN, P.A.	,			
Principal Place of Business	Mailing Address		- INDICALI DIDO ALTRI DDAIT BISON DISON DELIN DIBIT	BION OIDII BION BION BION 7006
% ROBERT ULLMAN % ROBERT ULLMAN 521 S.ANDREWS AVE. 521 S.ANDREWS AVE. FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 3:		33301	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	}
			11/19/1984	
2. Principal Place of Business	2a. Mailing Address	م ام ما د	4. FEI Number 59-2480671	Applied For
21 Same as above Suite, Apt + otc.	Suite, Apt. #, etc.	9000K	<u> </u>	Not Applicable \$8.75 Additional
22 11	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip (Country	Zip	Country	8. This corporation owes or has paid the	
24 25 USA	29	30 USA	Personal Property Tax due June 30.	Yes No
9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Register	red Agent
ullman, robert		81 Name	い (ラ	
521 SOUTH ANDREWS AVE		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
FORT LAUDERDALE FL 33301				
		83		
		84 City		85 Zip Code
		[,] , ,	F	- L
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Statute	es, the above-named corporal	poration submits this statement for the purpos	se of changing its registered
office or registered agent, or both, in the St agent. I am familiar with, and accept the ob SIGNATURE Signature, typed or profed name of registered	ate of Florida. Such change was a bligations of, Section 607,0505, Flo	uthorized by the corporal	poration submits this statement for the purposition's board of directors. I hereby accept the purposers when reinstating.	appointment as registered
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4. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that he 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 eath; 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.

CIONATURE.

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944-763-7475