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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H44335

(8)

MEREDITH K. DONLY, P.A.

Mailing Address

C/O MEREDITH K. DONLY 209 SOUTHEAST THIRD TERRACE DANIA FL 33004

Principal Place of Business

C/O MEREDITH K. DONLY 209 SOUTHEAST THIRD TERRACE DANIA FL 33004 FILED Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/19/1985

Suite, Apt. #, etc.  27  Suite, Apt. #, etc.  27  City & State  City & State  28  Country  Country  Suite, Apt. #, etc.  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  8. 75 Additional Fee Required  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  8. This corporation owes or has paid the current year Intangible	2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Appli	ed For		
Secretary   Secr	21		26		59-2499286		Not A	pplicable		
City & State	Suite, Apt. #, etc.		Suite, Apt. #, etc.			E Cartificate of Status Desired				
20   20   20   20   20   20   20   20	22					5. Octanoace of dialag besited		Fee Requ	ired	
Zip   Country   Zip   Country   Zip   Country   B. This corporation cwes or has paid the current year (trainpible Personal Property Tax due June 30   Two   No   No   No   No   No   No   No	City & State	•	City & State			6. Election Campaign Financing	\$	<b>55.00</b> м:	ay Be	
Section   Sect	23					Trust Fund Contribution		Added to F	ees	
9, Name and Address of Current Registered Agent  DONLY, MERBOTTH K. 209 SOUTHEAST THIRD AVENUE DANIA FL 33004  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sactions 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. are mainlier with, and accept the collegions of, Section 607,0503 or of Priorida, Stuch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the collegions of, Section 607,0505 florida Statutes.  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  DP DONLY, MEREDITH K. 12. NAME  23 SIRET ADDRESS  007-51-72P  TITLE  DANIA FL  DELETE  21 TITLE  DELETE  21 TITLE  DELETE  21 TITLE  DANIA FL  DELETE  31 TITLE  Change  Addition  NAME  33 SIRET ADDRESS  007-51-72P  TITLE  DELETE  33 SIRET ADDRESS  007-51-72P  TITLE  DELETE  33 SIRET ADDRESS  007-51-72P  TITLE  DELETE  35 SIRET ADDRESS  007-51-72P  00-007-007-007-007-007-007-007-007-007	Zip	Country	Zip	Country	ŧ					
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DANIA FL 33004    B3	DO	NLY, MEREDITH K.		81	Name				İ	
DANIA FL 33004  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Forida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, to maintain with, an accept the origination of Control Statutes.  SIGNATURE  Signature required when rehabilities to DAVIE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE DP DONLY, MEREDITH K.  1.2 IMAME  DONLY, MEREDITH K.  1.3 SIRECT ADDRESS  DANIA FL  1.4 CITY-ST-ZP  TITLE DELETE 2.1 TITLE  DELETE 2.1 TITLE  DELETE 2.1 TITLE  DELETE 2.1 TITLE  DELETE 3.1 TITLE  D	209	SOUTHEAST THIRD AVENUE		82 Street Addre		ess (P.O. Box Number is Not Acceptab	le)			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statutes, and accept the obligation of Section 607.0505, Florida Statut	<u> </u>			83	83					
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SIGNATURE   Community   Signature   Symbol or printed name of registrated agent and little if application. (NOTE Registrated agent signature required when reshabitating)   DATE					City		FL   **	,	Je	
SIGNATURE   TITLE										
SIGNATURE   Communication   Signature   Symbol or printed name of registrated agent and little if application.   (NOTE Registered Agent signature required when rehntalishing)   DATE	office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered									
12.										
12.	SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
NAME   DONLY, MEREDITH K.   1.2 NAME   STREET ADDRESS   209 S.E. THIRD TERR.   1.3 STREET ADDRESS   1.4 CITY-ST-ZEP   DANIA FL   DELETE   2.1 TITLE   Change   Addition						ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTORS I	N 12	
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14. I hereby certify that the information supplied with this filling does 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 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 charged, or on an attachment with an address.

SIGNATURE.

Rudia A Horline

115108

954-923-2167