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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT #

1. Corporation Name H50597

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

FILED

Mar 05 1998 8:00am

Secretary of State

E.A.G.(C. CORP.	• •		A ARBICHI BIRL BAIN REIR: BIIN BINN I	ådi digir æjæri æjæri gigri bibji gigri fibi	
	ce of Business	Mailing Address	* - 4	1 1521011 \$101 mills #4101 mills 42111 11		
C/O MICHAEL CATALOGNA C/O MICHAEL CATALOGNA 1582 S. E. THIRD COURT DEERFIELD BEACH FL 33441-4419 DEERFIELD BEACH FL 33441-4419			Ī	DO NOT WRIT	E IN THIS SPACE	
• • • • · · · · · · · · · · · ·			• • • • • • • • • • • • • • • • • • • •	3. Date Incorporated or Qualified		
	PAGE CO.	2a. Mailing Address		04/04/1985		
	Place of Business	2a. Mailing Address	A A	4. FEI Number	Applied For	
	0 30 3Ng CI	28 EAR (CURR	59-2614699	Not Applicable	
Suite, Apt.		27 1660 SE 31	rd ct	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	OR Field Beach Fl.	City & State 28 DecRField		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 3341		29 33 YYI	Country 30 BROWERD	8. This corporation owes or has p Personal Property Tax due Jun-	e 30. Yes No	
	g. Name and Address of Current I	Registered Agent	Q1 Nome	10. Name and Address of New R	egistered Agent	
Catalogna, Michael A.			81 Name			
170	854 FOXBOROUGH LANE		82 Street Addre	ess (P.O. Box Number is Not Accepta	ıble)	
,	1			83		
ВО	OCA RATON FL 33434		65			
	_		84 City		FL 85 Zip Code	
11. Pursuant office or r	to the provisions of Sections 607.0502 a registered agent, or both, in the State of am familiar with, and accept the obligation	and 607,1508, Florida Statute Florida, Such change was a	es, the above-named corporations authorized by the corporation	pration submits this statement for the on's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered	
_	im familiar with, and accept the obligation	ons of, Section 607,0505, Fig	orida Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent a	and title it applicable (NOT	E: Registered Agent signature require	d when reinstating)	DATE	
12.	OFFICERS AND [DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	CATALOGNA, MICHAEL		1.2 NAME			
STREET ADDRESS	17854 FOXBOROUGH LANE		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL	Delete	1.4 City-St-ZiP		Character L Addition	
TITLE		☐ DELET E	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition	
NAME		percit	3.2 NAME		change realition	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		,	
STREET ADDRESS			5.3 STREET ADDRESS	•	,	
CITY-ST-ZIP			5.4 CITY+ST+ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
	i		■			

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 oath; that I am an officer or director of the corporation or the receiver of 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.

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