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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(5)

DOCUMENT # H72688 GARDNER ACCOUNTING COMPANY Principal Place of Business Mailing Address 7481 W OAKLAND PK BLVD. 7481 W OAKLAND PK BLVD. LAUDERHILL FL 33319 DO NOT WRITE IN THIS SPACE LAUDERHILL FL 33319 3. Date Incorporated or Qualified 08/23/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2568604 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. ΠNο 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GARDNER, ALFRED J. 7481 W OAKLAND PK BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) LAUDERHILL FL 33319 83 City 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Addition 11 TITLE Срадое TITE F GARDNER, ALFRED J. 1.2 NAME NAME 7481 W OAKLAND PK BL. 1.3 STREET ADDRESS. STREET ADDRESS. LAUDERHILL FL CITY-ST-ZIP 1.4 CITY-ST-2IP DELETE Change noitibba TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change \_\_\_ Addition TITLE 3.2 NAME NAME 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 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP

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 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.

**SIGNATURE:** 

alfider & Barangi 11PA

FILED

Jan 20 1998 8:00am

Secretary of State