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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Mar 19 1998 8:00am Secretary of State

1. Corporatio		# H970 RRY & ASSOCIA		(9)							
Principal Plac	e of Busines	SS .	Mailin	g Address						K OJAH IJOI	
4951 NORTH UNIVERSITY DR				4951 NORTH UNIVERSITY DR							
SUITE 15				SUITE 15							
LAUDERHILL FL 33351 US				LAUDERHILL FL 33351 US				DO NOT WRITE IN THIS SPACE			
US			US					 Date Incorporated or Qualified 01/29/1986 			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number	Ar	pplied For	
				26				<u>59-2637733</u>	No	t Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75		
22 :: City & State ::				City & State					Fee Re		
				28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1		
Zip		Country	Zış)	Cour	ntry		8. This corporation owes or has paid the curre			
24	25			29 30				Personal Property Tax due June 30. Yes No			
		and Address of Curi	ent Registere	d Agent				10. Name and Address of New Registered A	gent		
THORNBERRY, KENNETH D.						81	Name				
4951 NORTH UNIVERSITY DR SUITE 15							Street Addre	Address (P.O. Box Number is Not Acceptable)			
Suite 12 Lauderhill FL 33351				83							
CAODENNICE PL 55551											
	84 City			•	FL	'	Code				
office or reagent. Far SIGNATURE			i lar oris if, So agent and title if and ND DIRECTO	olicabile. (NC				oration submits this statement for the purpose of con's board of directors. I hereby accept the appoint of the purpose of the appoint of the			
TITLE	PD			☐ DELETE	1.1 TITI	LE			Change	Addition	
NAME		Berry, Kenneth C),		1.2 NA/	ME					
STREET ADDRESS		W. 31ST PLACE		1.3			ADDRESS				
CITY-ST-ZIP	SUNRIS	E FL			1.4 CIT	Y-ST	- ZIP				
TITLE				L. DELETE	2.1 T(T)	LE		-[Change	Addition	
NAME					. 2.2 NAI	-					
STREET ADDRESS							ADDAESS				
CITY-ST-ZIP TITLE				☐ DELETE	2. 4 CIT 3 1 TITL		I-ZIP		Change	Addition	
NAME					3.2 NAM			L		AGUITUTI	
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					3.4. CIT						
TITLE				DELETE	4.1 T(T)		-"	I	Change	Addition	
NAME					4. 2 NA	ME		_	-	_	
STREET ADDRESS					4.3 STR	EET A	DDRESS				
CITY-ST-ZIP					4.4 CIT	Y-ST-	- ZIP				
TITLE				DELETE	5.1 TITL	Ε			nange	☐ Additido	
NAME					5.2 NAN	Æ			从 マ	111	
STREET ADDRESS					5.3 STR	EET A	DDRESS	7/	7/ //	1/91	
CITY-ST-ZIP				Decement.	5.4 City		ZIP		- /	(/	
TITLE				☐ DELFTE	6.1 TITL			90000246221	 Gnange	Addition	
NAME OTDEET ADDRESS					6.2 NAN		220102	-03/19/9801022023	i		
STREET ADDRESS				6.3 STREET ADDRESS				***158.75		ļ	
CITY ST ZIP					6.4 CITY	1-51-	· 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 door station or this report or thistyle impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an application with an addless.