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

**PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State

## **FILED** Apr 27 1998 8:00am

	1998	DIVISION OF CORPORATIONS		ONS	Secreta	ry of State
	MENT # J1959 IT BOOKS, INC.	99 (6)				
Principal Plac	e of Business	Mailing Address	······································			if Birki Dirik Gibit Gibit Birit Birit 1991
	YWOOD BLVD		2828 HOLLYWOOD BLVD			
P.O. BOX 2012 HOLLYWOOD FL 33020			P.O. BOX 2012 HOLLYWOOD FL 33020		DO NOT WRITE II	N THIS SPACE
					3. Date Incorporated or Qualified 06/17/1986	
2. Principal Place of Business		2a. Mailing Address	28. Mailing Address		4. FEI Number	Applied For
21		26			59-2724719	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	See Regulred
City & Stale		City & State	<del>_</del>		6. Election Campaign Financing	\$5.00 May Be
Zip Country			Zip Country			Added to Fees
24	25	29	30		This corporation owes or has paid     Personal Property Tax due June 3	
	9. Name and Address of Curr				10. Name and Address of New Regi	
	OTTLIEB, SANFORD E.		81	Name		
	828 HOLLOYWOOD BLVD IOLLYWOOD FL 33020		82 Street /		ress (P.O. Box Number is Not Acceptable	}
	IOLLIWOOD FE 33020					
			84	City		<b>85</b> Zip Code
44 5				_		FLI
office or r	<b>to the</b> provisions of Sections 607.0 <b>egistere</b> d agent, or both, in the Sta	502 and 607.1508, Florida Statu ite of Florida, Such change was	ites, the above authorized by	e-named corpora the corpora	poration submits this slatement for the pur tion's board of directors. I hereby accept	pose of changing its registered the appointment as registered
agent. i a SIGNATURE	m tamiliar with, and accept the obt	igations of, Section 607.0505, f	lorida Statutes	<b>S</b> .		
	Signature, typed or printed name of registered a	· · · · · · · · · · · · · · · · · · ·		nt signature requi	ired whon reinstating)	DATE
12.	PD OFFICERS A	AND DIRECTORS  DELETE	13. 1.1 TITLE	<del></del>	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12  Change Addition
NAME	GOTTLIEB, SANFORD E.	C vector	1.2 NAME			Onlarige Accounts
STREET ADDRESS	2828 HOLLYWOOD BLVD		1.3 STREET	ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 C(TY - S)	T-ZIP		
TITLE Name	DELET		2 1 Title			Change Addition
STREET ADDRESS			2.2 NAME 2.3 STREET	ADDRESS		
CITY-ST-ZIP			2. 4 CITY - S			ļ
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME CTREET LODDICCC			3.2 NAME			
STREET ADDRESS CITY-ST-ZIP			3.3 STREET . 3.4. CHY-S			
TITLE		DELETE	4.1 TITLE	1 - 211		Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST 5.1 TITLE	- ZIP		Change Addition
NAME			5.2 NAME			En grande En vogeton
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP		Drive	5.4 CITY - ST	I - ZIP	····	
TITLE NAME		☐ DELETE	6.1 TITLE			Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET A	ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST	i		
	ertify that the information supplied	with this filing does not qualify t			Section 119.07(3)(i) Florida Statutes I fur	ther certify that the information

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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify 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