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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 27 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J49310

(2)

E	ELASTI	ZELL CO	PRPORATION OF F	FLORIDA, INC.	•								
Princ	ipal Place	e of Busines	SS	Mailing Address	s				7	i nadiala gani afalb landa kinda kidit g	1 410 0	ANI MARIN BABAN ANA	II Birii i 1881
6251 44TH ST N 6251 44TH ST N									·				
1921 1921									1	DO MOTIVOIT			
PINELLAS PARK FL 34665					PINELLAS PARK FL 3486S			DO NOT WRITE IN THIS SPACE					
US				US	U\$			3.	Date Incorporated or Qualified				
2. Principal Place of Business				A- Mailing Add	2a, Mailing Address			 -	12/30/1986 FEI Number				
							4.			- 1 - 1 - 1	pplied For		
21	Suite, Apt. #, etc.			26 Suite Ant #	Suite, Apt. #, etc.			+	59-2748527			ot Applicable Additional	
22			—	27			5.	Certificate of Status Desired			equired		
City & State					City & State			+-	Election Campaign Financing			May Be	
23	3			<u></u>	28			0.	Trust Fund Contribution			to Fees	
Zij	ip Country			Zip					8.	This corporation owes or has p			
24	25		29	29 30							· - ·		
	g, Name and Address of Current]		10.	Name and Address of New R		d Agent		
_	SCI	HIERHOLZ	. JOHN C			81	T-6	Vame					
					82 Street Add			op (D	O. Box Number is Not Accepta	hlo)		·	
6151 44TH ST N SUITE 1921								oli eet vaare	785 (F.	.O. DOX NUMBER IS NOT ACCEPTE	ייטוע		
			RK FL 34665			83				<u> </u>		 	
						04	+	24 .					0-1-
•						84	'l'	City			F	B5 Zip	Code
11. P	ursuant t	o the provis	sions of Sections 607.050	02 and 607.1508, Flori	da Statutes, the	abov	e-n	amed corpo	oration	submits this statement for the	ourpose	of changing if	ts registered
0	iffice or re	egi ste red aç m fam iliar w	gent, or both, in the State	e of Florida. Such char rations of Section 607	ige was author 0505, Florida S	ized by	y th	ie corporatio	on's b	oard of directors. I hereby acce	pt the a	ppointment as	registered
		iii iiga timaa yr	mit, and accept the cong	gations of Occion Cor	.0000, / 10/10/1	Mararo							
SIGN	ATURE :	Signature, types	d or printed name of registered ag	ent and title if applicable	(NOTE: Regis	lered Ap	ent s	agnature required	d when	reinstating)	DATE	-	
12.			OFFICERS AN	ERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFI	CERS A	ND DIRECTOR	1S IN 12
TITLE		PTD		DELETE		1.1 TITLE					Change	☐ Addition	
NAME			IHOLZ, JÖHN C		1.	2 NAME							
STREET			OLPHIN CAY LANE		1.3		1.3 STREET ADDRESS						
CITY-S	T-ZIP					1.4 CITY-ST-ZIP		TP P					
TITLE		VD		☐ DELETE		1 TITLE						Change	Addition
NAME			I, JACK D		; 2:		2.2 NAME						
STREET			BOBOLINK DRIVE		2	3 STREE1	STREET ADDRESS						
CITY-S	T-ZIP		A NIGUEL CA			4 CITY-	\$1-7	2IP		· · · · · · · · · · · · · · · · · · ·			
TITLE		VSD		∐ Di	ELETE 3	1 TITLE						Change	☐ Addition
NAME	1		OND, ROBERT M.		1	2 NAME		1					
STREET	ADDRESS		ARDMOOR BLVD #10	V .	3.	3 STREET	T ADI	DRESS					
CITY - S	T-ZIP	LARGO	rl			4. CITY-	ST-7	ZIP				17.6	7 7 2 2 2 2
TITLE				DE		1 TITLE						Change	Addition
NAME					- 2	2 NAME							
	ADDRESS					3 STREET							
CITY-S	T-ZIP					4 CITY-S	ST-Z	IP				Change	Addition
TITLE				∐ Dŧ		1 TITLE		ĺ				Change	Addition
NAME						2 NAME							
	ADDRESS				I	3 STREET							
	CITY-ST-ZIP					4 CITY - S	51-Z	IP .		···		Change	Addition
TITLE	1					1 TITLE		ĺ				C Cuange	
NAME	4DDDCCC					2 NAME	T 4 N-	20000					
	ADDRESS				i i	3 STREET							
CITY-S		ertify that th	ne information supplied v	vith this filling does not		4 CITY - S	_		Section	n 119.07(3)(i), Florida Statutes. I	further -	certify that the	information
in	idicatéd d	on this anno	ual report or supplement	al annual report is true	and accurate	and th	nat r	ny signature	e shall	I have the same legal effect as i	f made t	under oath; the	atlam an
o B	incer or c łock 12 o	or Block 13	ne corporation or the rec if changest, or on an atta	eiver or trustee empovichment with an addre	vered to execu	ie tnis	rep	ion as requi	ned b	y Chapter 607, Florida Statutes;	and tha	ı my name ap	pears in