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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

STEVEN L. BERZNER, ESQ., P.A.

(1)

FILED Feb 05 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		- I INDREED BLOT BEFEN THEN THEFT DESIGN THE	ANESS BIÐIN BIÐIN ÐIÐIN ÐIÐIN EIÐIN SOÐI
1040 BAYVIEW OR	1040 BAYVIEW DRIVE			
SUITE 605 STE 605				
FT LAUDERDALE FL 33304 US	FORT LAUDERDALE FL.: US	33304	DO NOT WRITE I	N THIS SPACE
			3. Date Incorporated or Qualified 03/03/1987	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-2774849	Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid	the current year Intangible
24 25	29	30	Personal Property Tax due June 3	
9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Reg	istered Agent
Berzner, Steven L., ESQ.		81 Name		
1040 BAYVIEW DRIVE		82 Street Add	ress (P.O. Box Number is Not Acceptable	2)
STE 605	•		. oso (. e. es. manson la mar nocoptable	•
FORT LAUDERDALE FL 33304		83		
		84 City		Ar Zin Code
				FL 85 Zip Code
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob- SIGNATURE 	ale of Florida. Such change was a digations of, Section 607.0505, Flo	authorized by the corpora	tion's board of directors. I hereby accept	the appointment as registered
Signature, typed or printed name of registered		E Registered Agent signature requi		DATE
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
SERTIFICATION ATTENDED	DELETE	1.1 TITLE		Change Addition
4040 DASOUTH DOBLE		1.2 NAME		
FART LAHOTOGALE EL		1.3 STREET ADDRESS		
TITLE FORT LAUDERDALE PL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	C better	2.2 NAME		Change Addition
STREET ADDRESS				
CITY-ST-ZIP		2.3 STREET ADDRESS		
TITLE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		3.2 NAME		Change Faciliti
STREET ADORESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DEL Ē TĒ	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-S1-ZIP		
TITLE	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		
14. I hereby certify that the information supplied	with this filing does not qualify for	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I fur	rther certify that the information
Indicated on this annual report or surplyement officer or director of the corporation of the re Block 12 or Block 13 if changed, or on an at	ntar armuar report is true and acci- eceiver or trustee empowered of a tachment with an address.	orate and mayrny signatu execute mis report as requ	re shall have the same legal effect as if m uired by Chapter 607, Florida Statutes; an	ade under oath; that f am an d that my name appears in