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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J63300** 

(4)

PELHAM-DAMON, INC.

**FILED** Mar 02 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						- I INDULLA OLIA MITON ITION ITITI DOLLE DELLA	I QIBII BIQIF QEBII BIQI	J 4680) 1883	
% ALVIN S. BLUM 2350 DEL MAR PLACE FT LAUDERDALE FL 33301		% ALVIN S. BLUM 2350 DEL MAR PLACE FT LAUDERDALE FL 33301	2350 DEL MAR PLACE			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  03/18/1987			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Ar	plied For	
21		26	)			65-0001384	<del>  </del>	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional	
22		27					Fee Re	equired	
City & State	0	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00		
Z <sub>1</sub> D	Country Zip Coi			Trust Fund Contribution LJ Added to Fees  Country 8. This corporation owes or has paid the current year Intangible					
24	25		30			Personal Property Tax due June 30.		] No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
	JM, ALVIN S.		1	81 Na	ame				
2350 DEL MAR PLACE			ļ.	82 St	reet Addre	ess (P.O. Box Number is Not Acceptable)			
FT LAUDERDALE FL 33301				B3					
			[1	B4 Ci	ty		65 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.								s registered registered	
SIGNATURE	Signature, lyped or printed name of registered r	event and title it and cable (NOT)	Registered	Agent sig	nature required	d when reinstating) D	ATE		
12.	· <del></del>	ND DIRECTORS	13.	- go n o g	- India Congario	ADDITIONS/CHANGES TO OFFICERS		S IN 12	
TITLE	PD DELETE 1.17		1.1 1111	.F			Change	Addition	
NAME	BLUM, ALVIN S.		1.2 NAM	<b>AE</b>					
STREET ADDRESS			1.3 STR	1.3 STREET ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL			Y - ST - ZIP			[] Chance	Addition	
TITLE	_		2.1 7171				☐ Change	Addition	
NAME ATOMET ADDRESS	BLUM, ANDREW F. 2350 DEL MAR PLACE		2.2 NAME 2.3 STREET ADDRESS		vroc			ļ	
STREET ADDRESS CITY-ST-ZIP	FT LAUDERDALE FL		2.4 CITY-ST-ZIP			Ť			
TITLE	TT DIODENDALI VE	☐ DELETE	3.1 TITLE				☐ Change	Addition	
NAME				3.2 NAME			•		
STREET ADDRESS			3.3 STR	EET ADDF	KESS				
CITY-ST-ZIP			3.4. CIT	Y-\$T-ZII	,				
TITLE			4.1 TITL				Change	Addition	
NAME			4. 2 NA						
STREET ADDRESS				EET ADDE	1				
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CIT	Y-ST-ZIP		·····	Change	Addition	
NAME		LJ DELETE	5.2 NAA						
STREET ADDRESS				EET ADDF	ess				
CITY-ST-ZIP				Y-ST-ZIP	- 1				
TITLE		DELETE	6.1 TITL				☐ Change	Addition	
NAME			6.2 NAA	<b>AE</b>					
STREET ADDRESS			6.3 STR	EET ADDF	æss				
CITY-ST-ZIP		144 AL 11 AN		Y-ST-ZIP		Postion 110 07/9/0 Florido Statutas   furth			

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 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.

GNATURE:

2/23/9P