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 #

J76033

(6)

EASTLAND DEVELOPMENT CORP.

3/3/91

FILED

Mar 11 1998 8:00am

Secretary of State

Principal Plac	e of Business	Mailing Address				
5200 TOWN (BOCA RATOR	CENTER CIRCLE N FL 33486	5200 TOWN CENTER CIRC BOCA RATON FL 33486	LE		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					06/04/1987	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For	
21	***	26			59-2820840 Not Applicable	
Suite, Apt. #, etc.				5. Certificate of Status Desired See Required		
City & Stat	22 27 City & State City & State					
23	ly a state				6. Election Campaign Financing \$5.00 May Be 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 30. 🔲 Yes 🔼 No	
	9. Name and Address of Curre	int Registered Agent			10. Name and Address of New Registered Agent	
ZIN	M er man, Bernard		81	Name	ne ·	
	00 TOWN CENTER CIRCLE		82	Street	eet Address (P.O. Box Number is Not Acceptable)	
B0	CA RATON FL 33486		83			
			03			
			84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statutes	s. the above	e-namec	ned corporation submits this statement for the purpose of changing its registered	
office or r	egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such change was au	rthorized by	the cor	corporation's board of directors. I hereby accept the appointment as registered	
-	and accept the oblig	ganoris of, occitori cor .occo, i for	ioa olalaloa	•		
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE:	Registered Age	nt signatur	alure required when reinstaling) DATE	
12.	, · 	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE		Dp	
NAME	ZIMMERMAN, BERNARD		1.2 NAME		Bernard Zimmerman	
STREET ADDRESS	21133 ORMAND COURT		1.3 STREET		- - - - - - - - - -	
CITY - ST - ZIP TITLE	BOCA RATON FL	DELETE	1.4 CITY-ST 2.1 TITLE	I - ZIP	Boca Raton, FL 33496 Change Addition	
NAME	DVP		2.1 TITLE 2.2 NAME		Ciralife Ci vontion	
STREET ADDRESS	MANDEL, NEWTON 345 PARK AVENUE			400bcee	ec	
CITY-ST-ZIP	NEW YORK NY		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP		30	
TITLE	8	DELETE	3.1 TITLE	1-611	☐ Change ☐ Addition	
NAME	MANDEL, NEWTON		3.2 NAME			
STREET ADDRESS	345 PARK AVENUE		3.3 STREET	ADDRESS	ss	
CITY-ST-ZIP	NEW YORK NY		3.4. City-ST-ZiP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS		•	4.3 STREET ADDR		38	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	T	4.4 CITY - ST	- Z IP		
TITLE		☐ DELET e	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET		is	
CITY-ST-ZIP TITLE		☐ DELET E	5.4 CITY-ST 6.1 TITLE	- ZIP	☐ Change ☐ Addition	
NAME		DELETE	6.2 NAME		Change Addition	
STREET ADDRESS			6.3 STREET	AUUBEGG	22	
CITY-ST-ZIP			6.4 CITY-ST			
14. I hereby o	ertify that the information supplied v	with this filing does not qualify for	the exempt	ion state	tated 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.						