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 # J78755

JOY E. MACDONALD, P.A.

(2)

FILED Apr 30 1998 8:00am Secretary of State



			ı			
Principal Place of Business Mailing Address						AIBII BIBII BIBII BIBIF IODI
6721 N. E. 21		6721 N. E. 21ST ROAD			†	
FORT LAUDERDALE FL 33308		FORT LAUDERDALE FL 33308				
					DO NOT WRITE IN THIS:	SPACE
					3. Date Incorporated or Qualified 06/15/1987	
2 Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0003386	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		Election Campaign Financing	\$5.00 May Be	
23		28	+		Trust Fund Contribution	Added to Fees
Zip	Country	7ip	Country 30		8. This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible Yes 2 No
24	25 A. Name and Address of Curre	29] ent Registered Agent	301		10. Name and Address of New Registered	
MACDONALD, JOY E.				Name		
6721 N.E. 21ST ROAD			82	Stroot Addr	ess (P.O. Box Number is Not Acceptable)	
FORT LAUDERDALE FL 33308			02	Street Addr	bas (1.0. box (quimber is 140) Modephable)	
1			83			
1			84	City		85 Zip Code
				-	F <u>L</u>	
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 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.						
SIGNATURE	Signature, typed or printed name of registrated a	over and other Cherola, data. (NICL	F Ponietered An	nt signatura rabuir	ad when reinstating) DATE	
12.		ND DIRECTORS	13.	on signature requir	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE			1.1 TITLE			Change Addition
NAME	MACDONALD, JOY E.		1.2 NAME			
STREET ADDRESS	6721 NE 21ST RD.		1.3 STREET	ADDRESS		
CITY-ST-ZIP			1.4 CITY-ST-ZIP			
TITLE			2.1 TITLE			Change Addition
NAME			2.2 NAME			,
STREET ADDRESS			2.3 STREET		* .	
TITLE		DELETE	2. 4 CITY-ST-ZIP DELETE 3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY-			
TITLE			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			İ
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP			Change Addition
TITLE			1 1			C CHARGE L ACCITION
NAME CTOSET ADDRESS			6.2 NAME	ADDRESS		ļ
STREET ADDRESS			6.3 STREET 6.4 CITY - S			
CITY-ST-ZIP	partitu that the information cumpled	with this Live does not qualify f			Section 119 07/3\(\text{ii}\) Florida Statutes I further or	ertify 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 expression.