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 #

J95722

(1)

CHAPIN, ARMSTRONG & BALLERANO, A PROFESSIONAL AS SOCIATION

Principal Place of Business

Mailing Address

1201 GEORGE BUSH BLVD. DELRAY BEACH FL 33483-7203 US

SIGNATURE:

1201 GEORGE BUSH BLVD. DELRAY BEACH FL 33483-7203 US FILED
Jan 23 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

	······································	<u></u>	·			10/01/198/					
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	L	Ap	plied For		
21	26					65-0006074		Not Applicable			
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.					- \$9.75 A			dditional		
22	27					5. Certificate of Status Desired	F	ee Re	quired		
City & State City & State						6. Election Campaign Financing	\$5	00	May Be		
23						Trust Fund Contribution Added to Fees					
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 Current Registered Agent					10. Name and Address of New Registered Agent						
		ne	to: region and regions of the first								
CHAPIN, RUBERT D					81 Name						
				82 Street Address (P.O. Box Number is Not Acceptable)							
DELRAY BEACH FL 33483											
				83							
Ì				City			Tot 1	Zip C	\n a's		
						FL	85	Zip C	.ode		
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.											
agent. I am laminar with, and accept the congations of, Section 607.0505, Florida Statutes.											
SIGNATURE											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND					
TITLE	PTD	☐ DELETE	1,5 TITLE		Į.		Ch	ange	L_ Addition		
NAME				1.2 NAME							
STREET ADDRESS	800 ANDREWS AVE. 1.38		1.3 STREE	ADDRES	S S						
CITY-ST-ZIP	DELRAY BEACH FL 1.40			ST-ZIP					1		
TITLE	VP	☐ DELETE	2.1 TITLE				Ch	ange	Addition		
NAME	Y		2,2 NAME								
STREET ADDRESS			2.3 STREE	' ADDDEE	.				ł		
	1,										
CiTY-ST-ZIP	BOYNTON BEACH FL			ST-ZIP	 		_E 1 c+	0000	Addition		
TITLE	\$	TT DEFEIE	3.1 TITLE			S FIESIGETT	X Ch	ange	☐ ¥00idaii		
NAME	Di Calanti i voj di inco i i di			MAME Ballerano, James A. Jr.							
STREET ADDRESS				ADDRES	21000 DWCCCWACCI HAME NOICH						
CITY-ST-ZIP	BOCA RATON FL 33428			ST-ZIP	Вос	a Raton, FL 33428					
TITLE		☐ DELETE	4.1 TITLE		Sec	retary	Ch.	ange	Addition		
NAME			4. 2 NAME			-					
STREET ADDRESS			4.3 STREE	ADDRES	SAUC	camp, Stephen J.			ŀ		
CITY - ST - ZIP			4,4 CITY - 1	T-71P		4 Walnut Terrace					
TITLE		☐ DELETE	5.1 TITLE		-Bec	a Raton, FL 33486	[] Ch	апое	Addition		
NAME			5.2 NAME		İ						
=				DP					I		
STREET ADDRESS			5.3 STREE		is						
CITY-ST-ZIP			5.4 CITY-:	T-ZIP			Tie		To Later		
TITLE		DELETE	6.1 TITLE				∟_1 Ch	ange	☐ Addition		
NAME			6.2 NAME		1				ł		
STREET ADDRESS			6.3 STREE	ADDRES	s				Į.		
CITY - ST - ZIP			6.4 CITY-	ST-ZIP					ĺ		
14. 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in											
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 occupants that have the same of the recognition of the occupant of the											
onicer of arector or are corporation, or the receipter or trusted 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, of on an articlement with an address.											