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**

FILED Feb 20 1998 8:00am Secretary of State

DOCU 1. Corporatio	MENT In Name	#	<09237	•	(4	!)						
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Principal Plac	e of Busines	S		Ma	iiling Address)))	II W IFIL IF#I
C/O FRANK VERZI					C/O FRANK VERZI							
103 S U S HWY 1 STE F4 JUPITER FL 33477				103 S U S HWY 1 STE F4 Jupiter FL 33477						DO NOT WRITE IN THE	S SPACE	
										3. Date Incorporated or Qualified		
										12/28/1987		·
2. Principal Place of Business				2a. Mailing Address						4. FEI Number		pplied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.						65-0056003		ot Applicable
22.				27						5. Certificate of Status Desired		Additional equired
City & State					City & State					6. Election Campaign Financing		May Be
23					28					Trust Fund Contribution		to Fees
Zip	Country			Zip Co			Country	Country		8. This corporation owes or has paid the co	urrent year In	tangible
24	25				29 30				<u> </u>	Personal Property Tax due June 30.		_] No
e, Name and Address of Current Registered Agent								т.	Nama	10. Name and Address of New Registere	d Agent	
	rzi, Linda						81	'	Name			
7627 SE FIDDLEWOOD LANE									Street Addre	Address (P.O. Box Number is Not Acceptable)		
HOBE SOUND FL 33455						83	╁			 		
								L				
							84	84 City		F	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes.								e-n	named corpo			ts registered
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta 									ne corporation	on's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE												
Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent sign									eignature require			
12.	DPT		OFFICERS AND	DIREC	TOHS DE	FTC	13.			ADDITIONS/CHANGES TO OFFICERS AT	OD DIRECTOR Change	Addition
NAME	VERZI, L	INDA					1.2 NAME				Ontingo	
STREET ADDRESS								1.3 STREET ADDRESS				
CITY-ST-ZIP	HOBE SOUND FL							1.4 CITY-ST-ZIP				
TITLE			- 		DEI	ETE	2.1 TITLE	•			Change	Addition
NAME	i						2.2 NAME					
STREET ADDRESS							2.3 STREET	T AD	DRESS			
CITY-ST-ZIP							2. 4 CITY-	ST-	ZIP			
TITLE					LI DEI	.ETE	3.1 TITLE				L Change	Addition
NAME							3.2 NAME					
STREET ADDRESS							3.3 STREET					
CITY-ST-ZIP	-				☐ DEI	CĂĘ	3.4. CiTY-	ST-	ZIP		☐ Change	Addition
TITLE					DC	.C15	4.1 TITLE 4. 2 NAME				L Change	L Addition
NAME STREET ADDRESS							4.3 STREET		DDECC			
CITY-ST-ZIP							4.4 CITY-S					
TITLE	 -	-			☐ DE	ETE	5.1 TITLE	- · · L			☐ Change	Addition
NAME							5.2 NAME				-	
STREET ADDRESS							5.3 STREET	T AD	DRESS			
CITY-ST-ZIP							5.4 CITY - S	ST - Z	P P			
TITLE			-		☐ DEL	ETE	6.1 TITLE				Change	Addition
NAME							6.2 NAME					
STREET ADDRESS							6.3 STREET	ADI	DRESS]
CITY-ST-ZIP	9	-,,,					6.4 CITY - S	ST-Z	IP .			

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 open attachment with an address.