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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

City & State

23

24

THE RESERVE

TITLE

NAME

STREET ADDRESS

Zip

K24722

(6)

City & State

28

29

ONE STEP BETTER, INC.

FILED

Apr 23 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address	
669 SW 3RD ST BOCA RATON FL 33486 US	P O BOX 5295 Lighthouse point fl 33074 Us	DO NOT WRITE IN THIS SPACE
		3. Date Incorporated or Qualified 05/23/1988
2. Principal Place of Business	2a, Mailing Address	4. FEI Number Applied For
21	26	65-0072122 Not Applicable
Suite, Apt. #, etc.	Suile, Apt. #, etc.	5. Certificate of Status Desired See Regulred Fee Regulred

30

25 9. Name and Address of Current Registered Agent COOPER, BARRY W. 867 SOUTHEAST 14TH TERRACE **DEERFIELD BEACH FL 33441**

	Personal Property Tax due June 30. Yes No						
	10. Name and Address of New Registered Agent						
81	Name						
82	Street Address (P.O. Box Number is Not Acceptable)						
83							
84	City FL 85 Zip Code						

8. This corporation owes or has paid the current year intangible

6. Election Campaign Financing

Trust Fund Contribution

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

12.			13.	required when reinstalling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE	☐ Change ☐ Additi	
NAME	COOPER, BARRY W.		1.2 NAME		
STREET ADDRESS	669 SW 3RD ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addit	
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
INTE		☐ DELETE	31 TITLE	☐ Change ☐ Additi	
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			34. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Additi	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 THILE	☐ Change ☐ Additi	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		

CITY-ST-ZIP 14. Thereby 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 suppliemental 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 chapter 607, or on an attactment with an address.

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

Barry W. Cooper

6 3 STREET ADDRESS

561-361-1062

Change

Addition

\$5.00 May Be

Added to Fees