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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1998			Sendra B. Mortham Secretary of State DIVISION OF CORPORATIONS			NS	Secretary of State
1, Corporatio	MENT # K	25634	(2)			*	
DOGRA	2 90 W ORLD III II	V C.					
Principal Place of Business Mailing Address 3706 N. OCEAN BLVD. 3706 N. OCEAN BLVD. FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 3							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
2. Principal P	lace of Business	2a. N	Mailing Address		·=···		06/01/1988 4. FEI Number
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution Added to Fees
Zip 24	Country 7/p 30 25 29 30 30 30 30 30 30 30 3				ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
BL	ACKE, LAWRENCE E	<u>-</u>	100 Ağulı		81	Name	IV, Halling and Approved of Herr Hoggstoless Agent
332	26 N.E. 33RD STREE	त ।		}	82	Street Add	dress (P.O. Box Number is Not Acceptable)
FO	rt Lauderdale fl	. 33308			`_		,
				L	83		
					84	City	FL 85 Zip Code
office or r	egistered agent, or boll m familiar with, and acc	thin the State of Florida cept the obligations of, S	Such change was Section 607,0505, FI	authorized orida Stati	by tutes.	he corpora	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered when rejectating)
12.		DEFICERS AND DIRECT		13.		argina.a.s	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME	D BINDLER, FRANC		DELETE	1 1 TIT			Change Additi
STREET ADDRESS	1323 S.E. 17TH S			1.3 STF	REET A	DDRESS	
CITY-ST-ZIP	FORT LAUDERDA	LE FL 33316	DELETE	1.4 CIT 2.1 TIT		ZIP	Change Additi
TITLE NAME			L_J OLLEIL	2.1 HA			L. Glange L. Addin
STREET ADDRESS	•					DDRESS	
CITY-ST-ZIP		·	T be eff	2. 4 CI		- ZIP	
TITLE NAME			∐ DELETE	3.1 TITE 3.2 NAI			Change Additi
STREET ADDRESS				4		DDRESS	
CITY-SY-ZIP				3 4, Cr)			
THLE			DELETE	4.1 1011			Change Additi
NAME STREET ADDRESS				4. 2 NA 4.3 STF		nnbree	
CITY-ST-ZIP				4.4 CIT			
TITLE			DELETE	5.1 1111			Change Addition
NAME				5.2 NAM	ME.		
STREET ADDRESS				5.3 STF			
CITY-ST-ZIP TITLE			DELETE	5.4 CIT 6.1 TITL		ZIP	Change Addition
NAME			La Dittele	6.1 III 6.2 NAM		1	Coongo CJ Nation
STREET ADDRESS	• •			6.3 STH		ODRESS	
CITY-ST-ZIP				6.4 CIT	Y - ST -	ZIP	

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 on an attachment with an address.

FILED

Apr 07 1998 8:00am