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 # K30918

(2)

FUTURE GENERATIONS, INC.

FILED Feb 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
· ·					
11098 BISCAYNE BLVD. P. O. BOX 61-1207					
SUITE 302	20101	N. MIAMI FL 33261-1207			DO NOT MORE IN THE COLOR
N. MIAMI FL	US			DO NOT WRITE IN THIS SPACE	
US					3. Date Incorporated or Qualified
ļ					08/12/1988
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0078256 Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Sta	to.	City & State			
		⊢ ¬ ′			6. Election Campaign Financing \$5.00 May Be
23		28	<u></u>		Trust Fund Contribution
Zip	Country	Zip	Coun	ry	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. 🔲 Yes 🛂 No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
GI	EARTNER, CLARK		6	⊓l Nam	ne
11	1098 BISCAYNE BLVD.		82 Street Add		Address (D.O. Day Number in Net Appendix blo)
	JITE 302	82 Street Add		2 31106	et Address (P.O. Box Number is Not Acceptable)
I	ORTH MIAMI FL 33161		5	3	
141	DRILL WINWILL 32101		`	"	
			ε	4 City	FL 85 Zip Code
ff Durantoni	to the are datas of Continue CO7 050	2 and 607 tEOD Florida Statuta	- +h- aba		
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 ramiliar with, and accept the obligations of, Section 607.0505, Fiorida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and tills if applicable, (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	ST	DELETE	1.5 TITL		Change L Addition
1	ZAWADZKI, PAUL		1		
NAME			1.2 NAM		
Street Address	3600 N.E. 24TH AVENUE		1,3 STR	et address	S [
CITY - ST - ZIP	FT. LAUDERDALE FL		1,4 CITY	-ST-ZIP	
TITLE	P	DELETE	2.1 TITL		☐ Change ☐ Addition
NAME	GEARTNER, CLARK		2.2 NAM	E	
STREET ADORESS	-11525 N.E. 22 DRIVE		22 STRE	ET ADDRESS	11098 BISCAYNE BLYD, STE 302
	-N. MIAMI FL				MIAMI, FL 33161
CITY-ST-ZIP	VP VP	DEFETE		-ST-ZIP	
TETLE	,,,	DELETE	3.1 TITL		Change Addition
NAME	KAPLAN, STUART		3,2 NAM	Ξ.	
STREET ADDRESS	2353 S.W. 181ST TERR.		3.3 \$TRE	ET ADDRESS	s
CITY - ST - ZIP	MIRAMAR FL		3.4. CITY	-ST-ZIP	
TITLE		DELETE	4,1 TITLE		Change Addition
NAME	\	-	4, 2 NAM		
			9		,
STREET ADDRESS				ET ADDRESS	9
CITY - ST - ZIP			4.4 CITY		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAM		
STREET ADDRESS			5.3 STRE	ET ADDRESS	<u>, </u>
CITY-ST-ZIP			5.4 CITY		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
		الما ما ما الما الما الما الما الما الم	1		Li Statige Li Addition
NAME	1		6.2 NAM		
STREET ADDRESS			6.3 STRE	et address	3
CITY-ST-ZIP	l		6.4 CITY	ST-ZIP	

Inhereby 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 eath; that I am an officer or director of the coporation of the preceiver 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. The preceiver of the preceiver of the property with an address.

SIGNATURE:

TURE REQUIFCIARK GEARTNER

1/5/98

305-891-6383