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PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K33603

(7)

FILTER FINDERS, INC.

FILED Mar 25 1998 8:00am Secretary of State

Principal Place of Business 4549 N. OCEAN DRIVE #5 LAUDERDALE-BY-THE-SEA FL 33306 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1988 2. Principal Place of Business 2a. Mailing Address 4549 N. OCEAN DRIVE #5 LAUDERDALE-BY-THE-SEA FL 33306 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1988 4. FEI Number Applied For	1161611	THOENS, INC.								
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City & State Ci	21							65-008/911		
City & State 23				. #, etc.				5. Certificate of Status Desired		
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Zip		в	—————·	le			['	· · · · • • • • • • • • • • • • • • • •		
28		Country			Country					
9. Name and Address of Current Registered Agent HALL, JEROME M. 4549 MORTH OCEAN DRIVE SUITE #5 LAUDERDALE BY THE SEA FL 33308 82 Sirest Address (P.O. Box Number is Not Acceptable) 83 Sirest Address (P.O. Box Number is Not Acceptable) 84 City FL 85 C		ļ, ·		100	Coontry		1 '	•		'
HALL, JEROME M. 4549 NORTH OCEAN DRIVE SUITE #5 LAUDERDALE BY THE SEA FL 33308 #4 City FL 85 Zip Code 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 Triorida 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 Triorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and the narpicative (Potential Statement for the purpose of changing its registered office or registered agent and the narpicative (Potential Statement for the purpose of changing its registered office or registered agent and the narpicative (Potential Statement for the purpose of changing its registered office or registered agent and the narpicative (Potential Statement for the purpose of changing its registered office or registered agent and the narpicative (Potential Statement for the purpose of changing its registered office or registered agent and accept the obligations of Science Agent signature required when reheatening) DATE 12. OFTICERS AND DIRECTORS IN 12 TITLE PTS HALL, JEROME M 4549 N. OCEAN DRIVE, #5 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PTS HALL, JEROME M 4549 N. OCEAN DRIVE, #5 14 CITY-ST-ZP 14 CITY-ST-ZP 15 TITLE DELETE 21 TITLE DELETE 31 TITLE DELETE 31 TITLE DELETE 31 TITLE DELETE 32 STATES ADDITES 42 CITY-ST-ZP TITLE DELETE 33 STREET ADDRESS CITY-ST-ZP 34 CITY-ST-ZP Addition AGDITIONS/CHANGES COPE TO FICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES COPE TO FICERS AND DIRECTORS IN 12 Change Addition ACCEPT ADDRESS CITY-ST-ZP ACCEPT ADDRESS	24			130]	1					
4549 NORTH OCEAN DRIVE SUITE #5 LAUDERDALE BY THE SEA FL 33308 82 Sirrest Address (P.O. Box Number is Not Acceptable) 83 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 agent, or both, in the State of Riorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and stink agriculture for the purpose of changing its registered signature registered agent and stink agriculture. SIGNATURE Signature typed or prevent name of registered agent and stink agriculture. 12. OFTICE RS AND DIRECTORS IN 12 TITLE PTS OFTICE RS AND DIRECTORS IN 12 TITLE PTS HALL, JEROME M 4549 N. OCEAN DRIVE, #5 LAUD BY THE SEA FL 14. CITY-ST-ZP 13. STREET ADDRESS CITY-ST-ZP 14. CITY-ST-ZP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PTS OFTICE RS A	НА		Total Tagle		81	Name				
SUITE #5 LAUDERDALE BY THE SEA FL 33308 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Socilons 607 0502 and 607 1508, Florida Statutes, the corporation submits this statement for the purpose of changing its 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, and accopit the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE Signature typed or private harmost tregistered agent and this Harpicable (NOTE Registered Agent signature requires when reflections) TITLE PTS OFFICERS AND DIRECTORS I 11 TITLE PTS OFFICERS AND DIRECTORS 12 NAME 11 STREET ADDRESS LAUD BY THE SEA FL 14 City ST-Zip TITLE PTS OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE LAUD BY THE SEA FL 14 City ST-Zip TITLE PTS OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE LAUD BY THE SEA FL 14 City ST-Zip TITLE PTS OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ASSA ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
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### City ### A City ##			12308		83			· · · · · · · · · · · · · · · · · · ·		
1. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florids Statutes, the above-nemed corporation submite this statement for the purpose of changing its registered agent, or both, in this State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0506, Florids Statutes. SIGNATURE Signature PTS	DA.	DODINOALE DI ME GEATE C	10000							
11. Pursuant to the provisions of Socious 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 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 office of registered agent, or both, in the State of Florida Statutes. SIGNATURE Title					84	City		E	85 Zip	Code
SIGNATURE Signature typed or princed name of tregistered agent and while if applications 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12.	11. Pursuant	to the provisions of Sections 607	0502 and 607 1508. FI	orida Statutes, ti	he above	-named	d corporat			ts registered
SIGNATURE Signature typed or princed name of tregistered agent and while if applications 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12.	office or re	egistered agent, or both, in the St	tate of Florida. Such ch	ange was autho	orized by	the corp	rporation's	s board of directors. I hereby accept the ap	pointment as	registered
Signature typed or priced carried of large letted deplicable MOTE Registered Agent signature required when reheatering) DATE	agent. I a	m tamillar with, and accept the or	oligations of, Section 6	07.05 0 5, FIDRI D 8	Statutes	i.				
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Signature, typed or priced name of trensferrer	Lagent and tille it emplicable	(NOTE: Bed	istored Agn	nt signature	re required wh	han reinstatung) DATE		-
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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 roport or supplemental annual roport 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 corever 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.

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