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

Feb 27 1998 8:00am									
Secretary of State									

EII ED

DOCUM 1. Corporation N DELUXE		# K63808 IG, INC.	}	(5	5)			!		1 8 8				
Principal Place of	of Business		Ma	iling Address										
					. SOUTH NUMBER 7				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
									02/07/1989					
2. Principal Place of Business 2a. Mailing A					Address				4. FEI Number Applied					
21				26					65-0099096		_	t Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			dditional guired		
City & State				City & State					6 Flori Consolut Financia			<u> </u>		
23			28	Ony a Onno					6. Election Campaign Financing Trust Fund Contribution			May Be o Fees		
Zip	2	Country	29	Ζφ		Country 30			This corporation owes or has paid to Personal Property Tax due June 30	the current ye	ar Inte			
		nd Address of Current		ered Agent		T	·		10. Name and Address of New Regis			,		
COU	SI FY ANG	EI A MARIE	- · - F			81	Name							
COUSLEY, ANGELA MARIE 17127 38TH LANE NORTH					82	82 Street Address (P.O. Box Number is Not Acceptable)								
LOXAHATCHEE FL 33470							Direct	t Address (F.O. Box Number is Not Acceptable)						
						83								
						84	City			85	Zip (Code		
44 0	Alexander de la	1 C		37.41.00 Flori	d . Cant d					FL "	-l la			
office or reg agent. I am	tne provisio jistered age tamiliar with	ns of Sections 607.0502 ht, or both, in the State (, and accept the obliga	of Florid tions of	la Such chan , Section 607.	ga Statute ige was a 0505, Flo	es, the above tuthorized by orida Statutes	the cor	poratio	ration submits this statement for the purp in's board of directors. I hereby accept the	he appointme	nt as	registered registered		
SIGNATURE						- <u>-</u>								
12.	griature, typicid or	OFFICERS AND			(NOTE	Hogistered Age	nt signature	e required	when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE	CTOR	9 INI 12		
TITLE	PST			☐ DE	LETE	1.1 TITLE		T	Abbittotolotikitoto 10 oli 10ci	☐ Ch		☐ Addition		
NAME		, ERIC RAYMOND				1.2 NAME		1			_			
STREET ADDRESS		TH LANE NORTH				1.3 STREET	address							
CITY-ST-ZIP	LOXAHAT					1.4 CITY-S	T - ZiP							
TITLE	.v			☐ DE	LETE	2.1 TITLE				Ch	ange	Addition		
MAME		, Patrick fred				2.2 NAME								
STREET ADDRESS		CKLAND STREET				2.3 STREET		1						
CITY · ST · ZIP	WEST PA	LM BEACH FL		Пъ	1575	2. 4 CITY - S	T-ZIP	-				- Ladition		
TITLE				[] DE	LEIE	3.1 TITLE		D		∐ Ch	ange	Addition		
NAME CYPETA ADDRESS						3.2 NAME 3.3 STREET	4000000	Pal	mieri, MIchael					
STREET ADDRESS CITY-ST-ZIP						3.4 CITY-5	ADDRESS	121	S.E. 31st Avenue					
TITLE				DE	LETE	4.1 TITLE	ii-zir	воу	nton Beach, FL 3	343 5 7 Ch	ange	Addition		
NAME						4. 2 NAME					•			
STREET ADDRESS						4.3 STREET	ADDRESS							
CITY-ST-ZIP						4.4 CITY-S	T-ZIP							
TITLE				DE C	LETE	5.1 TITLE				☐ Ch	ange	Addition		
NAME						5.2 NAME								
STREET ADDRESS						5.3 STREET	ADDRESS							
CITY-ST-ZIP						5.4 CHY-S	1-ZIP	ļ				11		
TITLE				□ DE	LETE	6.1 TITLE		}		☐ Ch	ange	Addition		
NAME DYDEST ADDRESS						6.2 NAME	inhere:							
STREET ADDRESS						6.3 STREET		ĺ						
CITY-ST-ZIP			. 40.1- 6	lies door not	ou plifu fo	6.4 CiTY-S		od in S	ection 119.07(3)(i), Florida Statutes. I fur	4)				

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 of the co

SIGNATURE: 2

ERICR. Coosley

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