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 #

(1)

CHARLES PASTERNACK MTD, INC.

FILED

Apr 17 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address		
348 GEORGETOWN DR. CASSELBERRY FL 32707	346 GEORGETOWN DR. CASSELBERRY FL 32707		

348 GEORGE Casselberr	TOWN DR. Y FL 32707	346 GEORGETOWN DE CASSELBERRY FL 327		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1989		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For		
21		26		59-2947514 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	e 	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	7(p	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
	Pasternack, Charles			me ·		
346 GE ORGETOWN DR. Casselberry Fl 32707				eet Address (P.O. Box Number is Not Acceptable)		
			83			
			84 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 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.						
SIGNATURE		, , , , , , , , , , , , , , , , , , , ,				
····	Signature, typed or printed name of registered age			aluro required when reinstaling) DATE		
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PACTEDNACK CHARLES	☐ DELE te	1.1 TITLE	☐ Change ☐ Addition		
NAME	PASTERNACK, CHARLES 346 GEORGETOWN DR.		1.2 NAME			
STREET ADDRESS	CASSELBERRY FL		1.3 STREET ADDRES	SS		
CITY-ST-ZIP TITLE	6	DELETE	1.4 CiTY - ST - ZIP			
	PASTERNACK, DOROTHY	(DECEIE	2.1 TITLE	Change Addition		
NAME STREET ADDRESS	346 GEORGETOWN DR.		2.2 NAME			
	CASSELBERRY FL		2.3 STREET ADDRES	22		
CITY-ST-ZIP TITLE	ONOCEDERATI TE	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Change Addition		
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRES	88		
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELET E	4.1 THTLE	Change Addition		
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRES	ss I		
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE	Change Addition		
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRES	ss		
CITY-ST-ZIP			5.4 CfTY-ST-ZIP	·		
TITLE		☐ DELETE	61 TITLE	Change Addition		
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRES	ss		
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

14. 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 trusted 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.