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

FILED Apr 21 1998 8:00am Secretary of State

	IMENT # K8702 EL STEWART, INC.	6 (6)		HANI ARAH ARAH DIDI BIRI BANI KAN
Principal Plac	ce of Business	Mailing Address			II ARI BIBIL BIBIL BIBIL BIBIL IBDI
17209 33RD	ROAD NORTH	17209 33RD ROAL	NORTH		
LOXAHATCHEE FL 33470 LOXAHATCHEE FL 3347					
				DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IIS SPACE
				' .	
2. Principal f	Place of Business	2a. Mailing Addre	SS.	05/10/1989 4. FEI Number	Applied For
1		26		65-0120548	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, ¢	otc.	5. Certificate of Status Desired	\$8.75 Additional
2		27		6. Certificate of Status Desired	Fee Required
City & Sta	ile	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
4	25	[29]	30	Personal Property Tax due June 30.	Yes □ No
	 Name and Address of Curre PPS, JEROME L. 	nt Hegistered Agent	81 Name	10. Name and Address of New Register	ed Agent
FT	: Lauderdale FL 33301		83	ddress (P.O. Box Number is Not Acceptable)	l1 7 0 1
			84 City	F	Zip Code
SIGNATURE		ID DIRECTORS	(NOTE Registered Agent signature re-	quired when reinstating) DATI ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
DILE	PD	☐ DELE			Change Addition
IAME	STEWART, JIMMIE L.		1.2 NAME		
TREET ADDRESS	17209 33RD ROAD NORTH		1.3 STREET ADDRESS		
ITY-ST-ZIP ITLE	LOXAHATCHEE FL	☐ DELI	1.4 CITY-ST-ZIP TE 2.1 TITLE	1.	Change Addition
AME		<u></u> , 000	22 NAME		C Colonido C Madallati
reet adoress			2 3 STREET ADDRESS		
TY-ST-ZIP			2 4 CITY-ST-ZIP		
TLE		DELE			Change Addition
ME	1		3 TAME		
REE1 ADDRESS			3.7 TREET ADORESS		
ty-St-ZIP		T1	3 SITY-ST-ZIP	V-1	
TLE		∐ DEL€	TE 4 TLE		Change Addition
AME]		4 AME		
REET ADDRESS TY-ST-ZIP			REET ADORESS		
it-si-zir it		DELE	TE 5. TLE		Change Addition
ME			5. AME		
REET ADDRESS			5 3 TREET ADDRESS		
TY-ST-ZIP			5.4T/ITY-ST-ZIP		
rle		☐ DELE			Change Addition
AME			6.2 NAME		
TREET ADDRESS			6.3 STREET ADDRESS		
ITY-ST-ZIP			64 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 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.

IGNATURE: A

4-12-98 521-2143575

CR2E034 (10/97)