FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNL	RPORATION JAL REPORT 1998		Secretar	. Mortham y of Stale CORPORATIONS	Secreta	ry of State
DOCUI 1. Corporatio	MENT #	K88462 IT OF BOCA, IN	(2)			*
Principal Place of Business 490 E PALMETTO PARK 110 BOCA RATON FL 33432 US			Mailing Address 490 E PALMETTO PARK #110 110 BOCA RATON FL 33432 US		DO NOT WRITE 3. Date Incorporated or Qualified 05/16/1989	
21	Place of Business		2a. Mailing Address 26		4. FEI Number 65-0133321	Applied For Not Applicable
22	Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State	Constan	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	25	ountry Iddress of Current R		Country 30	This corporation owes or has pa Personal Property Tax due June Name and Address of New Re-	30. Yes No
MAC, DENNIS 490 E PALMETTO PARK BLVD SUITE 110 BOCA RATON FL 33432 83				84 City	Idress (P.O. Box Number is Not Acceptab	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 12.	Signature, typed or printe	OFFICERS AND D		Registered Agent signature res	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	DP MAX, DENNIS 4201 N OCEA BOCA RATON	AN BLVD #C209	DELETÉ	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
CITY-ST-ZIP TIFLE NAME STREET ADDRESS	DS MAX, PATTI 4201 N OCEA	N BLVD #C209	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOCA RATON DT LEVINE, BURI 6539 RACQUI LAUDERHILL	ron Et club dr	□ DEL€TE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP RAPOPORT, E 5540 COACH BOCA RATON	Burton House Cir	□ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	oon more	<u> </u>	Det ETE	5.1 THLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS			☐ DELETE	6 1 7/1LE 62 NAME 6.3 STREET ADDRESS		☐ Change ☐ Addition

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 report or suppliemental 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 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

2/25/98

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FILED

Apr 21 1998 8:00am