

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

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
------------------------------------------------	-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------

DOCUMENT # L01985

1. Corporation Name

PELI, INC

Principal Place of Business

5890 ROOMAN ST
Hollywood, FL 33023

Mailing Address

5890 ROOMAN ST
Hollywood, FL 33023

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
21 5890 ROOMAN ST		26 5890 ROOMAN ST		7/14/1989		65-0156460		Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired		X		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing		Trust Fund Contribution		5.00 May Be Added to Fees	
24 33023		29 33023		25 USA		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
								X Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

Tacher Elias
88-77 COLLINS AVE
APT 1001
SUNFSIDE FLA, 33154

10. Name and Address of New Registered Agent

81 Name Robert J. SIEDLECKI
82 Street Address (P.O. Box Number is Not Acceptable)
5890 ROOMAN ST
83
84 City Hollywood FL 85 Zip Code 33023

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  Robert J. SIEDLECKI Pres. 3/9/98


(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	10101 COLLINS AVE	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	BAL Harbour Fla 33154	2.1 TITLE	2.2 NAME
TITLE	NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
STREET ADDRESS	10101 COLLINS AVE	3.1 TITLE	3.2 NAME
CITY - ST - ZIP	BAL Harbour Fla 33154	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	10101 COLLINS AVE	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
CITY - ST - ZIP	BAL Harbour Fla 33154	5.1 TITLE	5.2 NAME
TITLE	NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
STREET ADDRESS	10101 COLLINS AVE	6.1 TITLE	6.2 NAME
CITY - ST - ZIP	BAL Harbour Fla 33154	6.3 STREET ADDRESS	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 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.

SIGNATURE:

 Robert J. SIEDLECKI Pres 3/9/98 305 621-0389

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/97)