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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L20301

(2)

INDEPE	ENDENT POWER, INC.	,					
Principal Place	of Business	Mailing Address			1 18011831 QIV XIVII 80100 11111 00101 :		BINAL MERLE BINES INNI
1101 HILLCREST DRIVE 1101 HILLCREST DRIVE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021							
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 US US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					10/02/1989		
-	ace of Business	2a. Mailing Address	3		4. FEI Number 65-0240977		Applied For
Suite, Apt. i	# etc	Suite, Apt. #, etc	<u> </u>				Not Applicable 8.75 Additional
22	., •	27			5. Certificate of Status Desired	-	Fee Required
City & State	3	City & State			6. Election Campaign Financing	·	5.00 May Be
23	0	28	Country		Trust Fund Contribution		Added to Fees
Zip 24	Country 25	Zip 29	Country 30		 This corporation owes or has p Personal Property Tax due June 	-	
24]	9. Name and Address of Curren		1301		10. Name and Address of New R		
WE	EINTRAUB, ALBERT L., ESQ.		81	Name			
22	50 SW 3RD AVE		82	Street Addres	ss (P.O. Box Number is Not Accepta	ble)	
5TH FLOOR						· · · · · · · · · · · · · · · · · · ·	
MI	AMI FL 33129		83				
			84	City		FL 85	Zip Code
11. Pursuant t	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida	Statutes, the above-	named corpo	ration submits this statement for the		nging its registered
agent. Lar	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Section 607.050	was authorized by 1 05, Florida Statutes.	irie corporatio	it's board of directors, Friereby acce	pi ine apponin	will as registered
SIGNATURE	Signature, typed or printed name of registered age	at and take if evolvoobte	(NOTE Registered Agent	Leignalure required	Lubos raintalies)	DATE	
12.	OFFICERS AND		13.	agnature required	ADDITIONS/CHANGES TO OFFI		ECTORS IN 12
TITLE	U	DELET					Change Addition
NAME	FIELDS, CHET		1.2 NAME				•
STREET ADORESS	4483 N.W. 36TH ST.		1.3 STREET A	DDRESS			
CITY-ST-ZIP	MIAMI SPRINGS FL 33166	T bein	1.4 CITY - ST	- ZIP			Change
TITLE	TOBIN, HERBERT O		1			LJ.	Change
NAME	1101 HILLCREST DRIVE		2.2 NAME 2.3 STREET A	DDDCCC			
STREET ADDRESS CITY-ST-ZIP	HOLLYWOOD FL		2. 4 City-St				
TITLE	CD	DELE					Change Addition
NAME	WEINTRAUB, ALBERT L		3.2 NAME				
STREET ADDRESS	2250 S.W. 3RD AVENUE, 5TI	H FLOOR	3.3 STREET A	DDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. CHY-ST	- ZIP			0
TITLE	DS TORIN MADY A	☐ DELE				□ '	Change
NAME	Tobin, Mark A 203 S.W. 13th Street		4.2 NAME	DONESO			
STREET ADDRESS	MIAMI FL		4.3 STREET A				
CITY-ST-ZIP TITLE	D	DELE"		· ZIP	***************************************		Change
NAME	BAKER, NORMAN		5.2 NAME				
STREET ADDRESS	21-21 43RD AVENUE		5.3 STREET A	DORESS			
CITY-ST-ZIP	LONG ISLAND CITY NY		5.4 CITY-ST	- ZIP			
TITLE		☐ DELE	E 6.1 TITLE				Change Addition
NAME			6.2 NAME				
STREET ADDRESS	1		6.3 STREET A				
CITY-ST-ZIP	partifu that the information evention	ith this filing/does not au	6.4 CITY-ST-	-ZIP	ection 119.07/31(i) Florida Statutos	I further certify	that the information
indicated officer or e Block 12 c	certify that the information supplied we on this annual report or supplementa director of the corporation of the luce or Block 13 if changed, or on any atta-	annual report is true ar eiver or trustee empower chinent with an address.	nd accurate and that ed to execute this re	t my signature aport as requi	a shall have the same legal effect as red by Chapter 607, Florida Statutes	if made under of and that my no	path; that I am an ame appears in

Weintroub 3