FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00					ен ер	
PROFIT					FILED	
ANNU	JAL REPORT		FLORIDA DEPARTI Sandra B. I	MENT OF S	K)	1998 8:00an
DOCUMENT # L51617			(3)		Secreta	ary of State
Principal Place	ENDENT REP. SA e of Business ST.	LES & MARKETI Ma 74	NG, INC. iling Address 10 NW 12 ST.			
PLANTATION FL 33313 US			PLANTATION FL 33313 US			E IN THIS SPACE
					3. Date Incorporated or Qualified 02/21/1990	
2. Principal P	lace of Business	26.	Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# elc	26	Suite, Apt #, etc.		65-0182241	Not Applicable \$8.75 Additional
22	w, etc.	27	oute, April II, etc.		5. Certificate of Status Desired	Fee Required
City & State	e	28	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Coun		Zip	Country	8. This corporation owes or has p	aid the current year Intangible
24	25 9 Name and Addi	29 ress of Current Regist		90	Personal Property Tax due Jun 10. Name and Address of New R	
BR	OCCOLI, EDWARD		a and a confidence of the conf	81 Name		
74	10 NW 12 STREET			82 Street Ac	ddress (P.O. Box Number is Not Accepta	ble)
PU	ANTATION FL 33313	3		83		
						85 Zip Code
				84 City		FL
11. Pursuant office or ragent. La	to the provisions of Se registered agent, or bo im familiar with, and ac	ctions 607.0502 and 60 th, in the State of Florid cept the obligations of	07.1508, Florida Statutes la Such change was au Section 607.0505, Flori	s, the above-named control of the corporation of th	orporation submits this statement for the ration's board of directors. I hereby acce	purpose of changing its registered apt the appointment as registered
SIGNATURE	Signature, typed or printed nar	ne of registered agent and life	1 apperable (NOTE:	Registered Agent signature re	quired when reinstating)	DATE
12.	р	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change
TITLE NAME	BROCCOLI, SHE	RYL KATZ	DELETE	1.1 TITLE 1.2 NAME		C Change C Addition
STREET ADDRESS	7410 NW 12TH	ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL	33313	DELETE	1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME			[] URLEIE	2.1 TITLE 2.2 NAME		CT change CT vacanon
STREET ADDRESS				2.3 STREET ADDRESS	12	
CITY-ST-ZIP	 		T butte	2. 4 CITY-ST-ZIP		Change Addition
TITLE NAME			DELETÉ	3.1 TITLE 3.2 NAME		C CHAINGE C ADDITION
STREET ADDRESS				3.3 STREET ADDRESS		
CITY-ST-ZIP				3.4. CITY-ST-ZIP		Aldress Address
TIFLE			☐ DELETE	4.1 TITLE		Change Addition
NAME Street address				4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP				4.4 CITY - ST - ZIP		
TITLE			DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS				5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY+ST+ZIP		
TITLE		AND THE RESIDENCE AND THE PARTY AND THE PART	DELETE	6.1 TITLE		☐ Change ☐ Addition
	1					

6.3 STREET ADDRESS

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 minual 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 occupier or trightine empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an allock interest with an address.

STREET ADDRESS

SIGNATURE: