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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

FILED Mar 04 1998 8:00am Secretary of State

·	1998		DIVISIO	DIVISION OF CORPORATIONS					пу		iaic	
DOCUI 1. Corporation CCAK,	i i talito	L62659	(2)					A INGARAN AND BUMP HIDLE AND FAMILE	if 818 11 8 1811	LIPIT AADD GEBL	 118 11 1461	
Principal Place	o of Rusinose		Mailing Address						M BLUIN BARIL	DANK DANK DIGI		
•	e or business		Ü									
ISSIE KATZ 6757 STARKE	YS PL	ISSIE KATZ 6757 STARKEYS PL										
LAKE WORTH FL 33467			LAKE WORTH FL 33467					DO NOT WRITE IN THIS SPACE				
U\$		US					3. Date Incorporated or Qualified					
9 Principal P	lace of Business		2a. Mailing Addres					03/30/1990 4. FEI Number		1 140	plied For	
21	acc or Edsirious		26				65-0202517	Applied For Not Applicable				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							\$8.75			
22		27					5. Certificate of Status Desired		Fee Re	quired		
City & State	9	City & State				6. Election Campaign Financing	_	\$5.00				
23			28					Trust Fund Contribution		Added t		
Zip	├ ─¬	untry	Zip		ountry	,	ļ	 This corporation owes or has per Personal Property Tax due June 			angible] No	
24	9. Name and Ad	dress of Current F	[29] Registered Agent	30	T			10. Name and Address of New Re			1140	
KΔ.	tz. Issie		 		81	Name					1	
	7 STARKEYS PL				82	Street	Addres	ss (P.O. Box Number is Not Acceptal	nle)			
#10		oz Street A			Addres	SO (1 TO LOOK FROM THE TANK FROM THE	J.U/					
LAKE WORTH FL 33467					83							
					84	City				85 Zip (Code	
44 5		007.01		Ó4-1					FL	1 1		
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.												
	m tamiliar with, and	accept the obligation	ons of, Section 607.05	05, Florida St	atutes	S .						
SIGNATURE	Signature, typed or printed	name of registered agent a	nd title if applicable	(NOTE: Register	ed Age	ent signature	bankupan s	when reinstating)	DATE			
12.		OFFICERS AND I		13				ADDITIONS/CHANGES TO OFFI	CERS AND			
TITLE	D		[] DELE		TITLE					Change	Addition	
NAME	KATZ, ISSIE	10 DI 40E			NAME							
STREET ADDRESS	6757 STARKEY					ADDRESS	ļ				Į.	
CITY-ST-ZIP TITLE	D LAKE WORTH	<u>rt </u>	DELE		CITY-S TITLE	it - ZIP	 			Change	Addition	
NAME	KATZ, ETTIE		٠٠٠٠ ا	I -	NAME		1					
STREET ADDRESS	6757 STARKEY	'S PLACE				ADDRESS					ĺ	
CITY-ST-ZIP	LAKE WORTH				CITY-5							
TITLE			☐ DELE	TE 3,1	TITLE					Change	☐ Addition	
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STREET ADDRESS				I -		ADDRESS					İ	
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STREET ADDRESS						ADDRESS	1				1	
CITY-ST-ZIP				P	CITY-S						İ	
TITLE			DELE		TITLE	-				Change	Addition	
NAME				5.2	NAME							
STREET ADDRESS				5.3	STREET	ADDRESS						
CITY-ST-ZIP				_	CITY-S	T-ZIP				-		
TITLE			DELE		TITLE		ļ			Change	☐ Addition	
NAME					NAME							
STREET ADDRESS						ADDRESS					.	
CITY-ST-ZIP				6.4	CITY - S	T-ZIP						

I hereby certify that the information supplied with this filling 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 conoration or the receiver of the conoration of the