PROFIT CORPORATION ANNUAL REPORT			FTEI	R MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			FILED Jan 28 1998 8:00am						
1998				DIVISION OF CORPORATIONS			Secretary of State						
1. Corporatio	SEDLAK AGE	L65889 NCY, INC.		(2)									
Principal Place of Business Mailing Address 3111 UNIVERSITY DR. 1852 MONTE CARLO WAY SUITE 615 CORAL SPRINGS FL 33065-5060 US								DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
03									04/17/1990	ieo			
2. Principal P	lace of Business		2a.	Mailing Address	· · · · · ·		<u>-</u>		4. FEI Number		T	Anı	olied For
21			26						59-3006909		F		Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	ı 🗆			dditional
City & Stat	е		Ľ	City & State			·	•	6. Election Campaign Financia	ng	\$5	.00	May Be
23			28						Trust Fund Contribution				Fees
Zip 24	25	Country	29	Zip	30	Country	,		8. This corporation owes or ha Personal Property Tax due	June 30.	☐ Yes	_	ingible No
		Address of Current	Regist	ered Agent					10. Name and Address of New	v Registered	i Agent		
	iandin, gary i.					81	Na	me					
•	597 N UNIVERS					82	Str	et Addre	ess (P.O. Box Number is Not Acce	eptable)			· · · · · · · · · · · · · · · · · · ·
L	AUDERHILL FL (33319				83							
						84	Cit	1		FL	85	Zip C	ode
11. Pursuant office or r agent, I a	to the provisions of egistered agent, of im familiar with, an	f Sections 607.0502 r both, in the State of d accept the obligati	and 60 f Florid ons of,	7.1508, Florida Stat a. Such change wa Section 607.0505,	tutes, ti s autho Florida	he above prized by Statutes	e-nan the	ned corpo corporation	oration submits this statement for on's board of directors. I hereby a	the purpose iccept the ap	of chang pointme	ing its nt as r	registered egistered
SIGNATURE													
12.	Signature, typed or print	of name of registered agent. OFFICERS AND			OTE, Reg	istered Age	ent sign	ature require	d when reinstating) ADDITIONS/CHANGES TO C	DATE	ID DIREC	TOR	2 INI 12
TUTLE	Р	OFFICERS AND	סוותבט	DELETE		1.1 TITLE			ADDITIONS/OFFANGES TO C	i HOCHO AN	Cha		Addition
NAME	SEDLAK, G	UY				1.2 NAME							
STREET ADDRESS	1852 MONT	E CARLO WAY				1.3 STREET	ADORE	ss					
CITY - ST - ŽIP	CORAL SPE	RINGS FL				1.4 CITY-S	T-ZIP						
TITLE				□ DELETE		2.1 TITLE					Cha	inge	Addition
NAME						2.2 NAME		ļ					
STREET ADDRESS						2.3 STREET		SS					
CITY - ST - ZIP TITLE				☐ DELETE	_	2. 4 CITY - S 3.1 TITLE	ST-ZIP	-			Cha	nne	Addition
NAME						3.2 NAME						a igo	E riddicidii
STREET ADDRESS						3.3 STREET	ADDRE	SS					
CITY-ST-ZIP						3.4. CITY - S	ST-ZIP						
TITLE				DELETE		4,1 TITLE					Cha	nge	Addition
NAME						4. 2 NAME							
STREET ADDRESS						4,3 STREET		SS					
CITY-ST-ZIP TITLE				☐ DELETE		4.4 CITY - S' 5.1 TITLE	T-21P				☐ Cha	nge	Addition
NAME						5.2 NAME						പപ്പഠ	
STREET ADDRESS						5.2 NAME	4DDRE	ςς					

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

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: New Acall REGUY SEDIAK PRES

☐ DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

1/21/98

954-755-7171

☐ Change ☐ Addition