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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

FILED Jul 23 1998 8:00am Secretary of State

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			. 			
Principal Place	e of Business	Mailing Address				
C/O EDWARD		C/O EDWARD WACKS			•	
	Ward Blvd., Ste. 350 Fl 33 317-2204	8181 WEST BROWARD BLVD., STE. 350 PLANTATION FL 33324			U	DO NOT WRITE IN THIS SPACE
US	ic goot racov	US				3. Date Incorporated or Qualified
						06/05/1990
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0182342 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	э	City & State				6. Election Campaign Financing \$5.00 May Be
23	28					Trust Fund Contribution L Added to Fees
Zip	Country	Zip	Country			This corporation owes or has paid the current year Intangule Personal Property Tax due June 30.
24	25 Name and Address of Current	Pagistared Agent	30	7		Personal Property Tax due June 30. Res No 10. Name and Address of New Registered Agent
		negistored Agent		81	Name	10. Name and Adologe of feet Hogazonea Agent
	uziel, david M. 31 w. Broward Blvd					
	E. 35 0			62	Street Add	dress (P.O. Box Number is Not Acceptable)
	E. 350 ANTATION FL 33324			83		
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NITINION PE 33324					
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508. Florida State	utes, the a	bove	-named cor	rogration 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	Signature, typed or printed name of registered agent	and title if applicable (NC	D1f, Registere	ed Age	nt signature requ	uired when reinstaling) DATE
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 T	1.1 TITLE		Change Addition
NAME	WACKS, DIANE		1.2 NAME		ŀ	
STREET ADDRESS \$181 W. BROWARD BLVD			1.3 STRE		ADDRESS	
CITY-ST-ZIP			1.4 0	ITY-S	T-ZIP	
TITLE	8 D	☐ DELETE	2.1 T	ITLE	ļ	☐ Change ☐ Addition
NAME			2.2 N	AME		İ
STREET ADDRESS	8181 W. BROWARD BLVD.		2.3 STRE		ADDRESS	
CITY-\$T-ZIP	PLANTATION FL		2. 4 CITY-ST-		T-ZIP	
TITLE		☐ DELETE	3.1 TITLE		1	Change Addition
NAME			3.2 N	AME		
STREET ADDRESS			3.3 S	TREFT	ADDRESS	
CITY-ST-ZIP				CITY - S	1-ZIP	
TITLE		☐ DELETE	4.1 7	ITLE		L_ Change L_ Addition
NAME			4.21	NAME	}	
STREET ADDRESS			4.3 \$	TREET	ADDRESS	
CITY-ST-ZIP				4.4 C(1Y-ST-Z)		
TITLE		DELETE	5.1 T		1	Change Addition
NAME			5.2 N			
STREET ADDRESS			4		ADDRESS	
CITY-ST-ZIP		T DELETE	_	HY-S	T- ZIP	
TETLE		☐ DELFT E	6.1 T			Change Addilion
NAME				IAME		j
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	positive that the information consider a	this filing does not as all.		HY-S		in Section 119.07(3)(i). Florida Statutes, I further certify that the information

Thereby certify that the information supplies with this fining does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. Further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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

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