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

May 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (9)M09804 GROUP 5, INC. Principal Place of Business Mailing Address 2574 NW 38 ST. 2574 NW 38 ST. **BOCA RATON FL 33434** BOCA RATON FL 33434 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/09/1985 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Buite, Apt. #, etc. 59-2503013 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name IEROPOLI, LAWRENCE 2574 NW 38 ST. **B2 BOCA RATON FL 33434** 83 11. Pursuant to the provisions of Soctions 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.

SIGNATURE LAWRENCE TROUPOLI MES. 12. OFFICERS AND DIRECTORS 13. DELETE Addition TITLE 11 TITLE NAME IEROPOLI, LAWRENCE 1.2 NAME BRINCSUILLE, 2574 NW 38 ST. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SI-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP

14. Thereby 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 early; 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 same applicates that the property of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my same applicates the corporation of the receiver of of the r

SIGNATURE: LAWRENCE ILRO POL

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