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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1	MENT # M1493 ESS MANAGEMENT ENTER	• •			
Principal Place of Business Mailing Address					
3385 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442 US		3385 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified As INC. 14065	
2, Principal F	Place of Business	2a. Mailing Address		05/06/1985 4. FEI Number Appl	lied For
21		26			Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5 Certificate of Status Desired S8.75 Ad	
City & State		City & State		Fee Heqi	
23		28		6. Election Campaign Financing \$5.00 M Trust Fund Contribution Added to	, ,
Zip	Country	7ip	Country	8. This corporation owes or has paid the current year Intan	
24	25	29	30	Personal Property Tax due June 30. Yes	
	9. Name and Address of Curren	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent	
60 BC	ANO, SUZANNE M. 58 VISTA LINDA LANE ICA RATON FL 33442		82 Street A 83 84 City	ddress (P.O. Box Number is Not Acceptable) FL 85 Zip Co	
11. Pursuant office or i agent. I a SIGNATURE	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the college in familiar with, and accept the college in familiar typing or provide name at indistinct diagnostic		es, the above-named of authorized by the corporida Statutes. f: Registered Agent signature re	corporation submits this statement for the purpose of changing its in cration's board of directors. I hereby accept the appointment as resequired when religiating)	registered gistered
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE NAME	P C IAMES I	☐ DELETE	1.1 TITLE	L_I Change	☐ Addition
STREET ADDRESS	SPANO, JAMES J. 6058 VISTA LINDA LANE		1.2 NAME 1.3 STREET ADDRESS		ļ
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE	Change	Addition
NAME	SPANO, SUZANNE M.		2.2 NAME		
STREET ADDRESS	\$058 VISTA LINDA LANE		2.3 STREET ADDRESS		ľ
CITY-ST-ZIP	BOCA RATON FL		2 4 CITY - ST - ZIP		
TITLE		L DELETE	3 1 TITLE	L_ Change	☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		2
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP	Change	Addition
NAME			4.2 NAME	Same Colonings	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Change	Addition
NAME			5.2 NAME		j
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change	Addition
NAME PTOEST APPOSESS			6.2 NAME		

14. I hereby certify that the information supplied with this king 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 truttee 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 areachment with an anidress.

FILED

May 20 1998 8:00am

Secretary of State