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

POCUMENT # M19998

(7)

EDWARD J. SCHACK, P.A.					
Principal Place of Business	Mailing Address				
6521 S.W. 145TH ST MIAMI FL 33158 US	8521 S.W. 145TH ST Miami FL 33158 US				
2. Principal Place of Business	2a. Mailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				

FILED Mar 10 1998 8:00am Secretary of State



us			U	S				DO NOT WHILE IN THIS), AQL		
			_					3. Date Incorporated or Qualified			
								08/28/1985			
2. Principal Place of Business			2a.	28. Mailing Address				4. FEI Number	Applied For		
21			26	26				59-2570131	_1_1	Not Applicable	
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
27							Celtificate of Status Desired	Fee	Required		
City & State				City & State				6. Election Campaign Financing	\$5.0	May Be	
23			26	26				Trust Fund Contribution Added to Fees			
Zip		Country		Zip	Count	ry		8. This corporation owes or has paid the curr	rent year	intangible	
4	2	5	29		30			Personal Property Tax due June 30.	Yes	☐ No	
	9. Name a	nd Address of Cur	rent Regist	ered Agent				10. Name and Address of New Registered	Agent		
SC	HACK, EDW	ARD J			8	1	Name				
6521 S.W. 145TH ST					8:	+					
	AMI FL 3315				0.	-	Street Woole	et Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33136			8:	3	<u> </u>						
					8	4	City	FL	85 Zi	p Code	
11. Pursuant	to the provision	ne of Sections 607 (0502 and 60	7 1508 Florida Statut	es the above	_L_	named corno	pration submits this statement for the purpose of	changing	its registered	
office or re	egistered ager	nt, or⊿b oth, in the St	ate of Florid	la. Such change was a	authorized t	by t	the corporation	on's board of directors. I hereby accept the appropriate the property accept the appropriate t	ointment a	as registered	
agent. La	m tanımar vitti	, and accept the or		Section 607.0505, Fk				2/-/-			
SIGNATURE	4/17	printed name of registered	600	44b J. 5	614V	4	/	of when reinstating)			
12,	Signature, tylfid or	OFFICERS			13.	gent	відпакого гедопас	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DRS IN 12	
TITLE	DP	OFFICERS	NAD DIREC	DELETE	1,1 TITLE	_		TESTICION INTEGES TO STY TO ELLO VILLE	Change		
Ì		EDWARD J.		- Deceme	•				Change		
NAME					1.2 NAME					}	
STREET ADDRESS		. 145TH ST			1.3 STREE						
CITY-ST-ZIP	MIAMI FL			Tell per eye	1.4 CITY-		ZIP				
TITLE				☐ DELETE	2.1 TITLE		- 1		Change	Addition	
NAME					2.2 NAME	•	1				
STREET ADDRESS					2.3 STREE	et a	DORESS				
CITY-ST-ZIP					2. 4 CITY	- ST	- ZIP				
TITLE				□ DELETE	3.1 TITLE				☐ Change	Addition	
NAME					3.2 NAME	E					
STREET ADDRESS					3.3 STREE	ET A	DORESS			ſ	
CITY-ST-ZIP					3.4. CITY-		ı				
TITLE	- 			DELETE	4.1 TITLE				Change	Addition	
NAME					4, 2 NAMI						
STREET ADDRESS					4.3 STREE		nnpsee				
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CITY-ST-ZIP				DELETE	4.4 CITY- 5.1 TIYLE		ZIP -		Change	Addition	
TITLE				DELLEIL	I ']		— Cuenta		
NAME]					5.2 NAME					1	
STREET ADDRESS					5.3 STREE					ì	
CITY-ST-ZIP					5.4 CITY-		ZIP				
TITLE				☐ DELETE	6.1 TITLE				∟ Change	Addition	
NAME					6.2 NAME]				
STREET ADDRESS					6.3 STREE	ET AI	DDRESS]	

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 ennual 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: