## 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

DOCUMENT # M56874

(4)

CASUAL ENVIRONS, INC.

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**FILED** 

Apr 03 1998 8:00am

Secretary of State

Principal Plac	e of Business	Mailing Address				t santante tas anich archt colle cont anni diffet bebit debit albit bibit bibit bibit		
1855 GRIFFEN RD. STE B-200 Dania Fl 33004		1855 GRIFFEN RD. STE B-200 Dania fl 33004						
	·					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						08/04/1987		
2. Principal P	lace of Business	2a. Mailing Addres	ss			4. FEI Number Applied	For	
21		26				<b>59-2835323</b> Not App		
Suite, Apt.	#, etc	Suite, Apt. #, etc.				\$9.75 Addition		
22		27				6. Certificate of Status Desired Fee Require		
City & State	e	City & State				6. Election Campaign Financing \$5.00 May	Re	
23		28				Trust Fund Contribution Added to Fee		
Zip	Country	Zip	Cou	untry		8. This corporation owes or has paid the current year Intangib	le .	
24	25	29	30			Personal Property Tax due June 30.  Yes No		
	9, Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Registered Agent		
M/	VDORSKY, MARSHA G.		· · · · ·	81	Name			
26	65 S. BAYSHORE DR., STE.	Rn3	20 00		-			
FIF	TH FLOOR	<b>000</b>		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)		
	AMI FL 33133			83				
******	AMI 1 E 00 100							
				84	City	FI 85 Zip Code		
11. Pursuant office or r	to the provisions of Sections 607, egistered agent, or both, in the S	0502 and 607 1508, Florida late of Florida, Such change	Statutes, the a was authorize	bove d by	named co	orporation submits this statement for the purpose of changing its registration's board of directors. I hereby accept the appointment as regist	stered ered	
SIGNATURE								
	Signature, typed or posted name of registeric			d Age	nt signature rec	quired when reinstating) DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	PD	☐ DELE				Change	Addition	
NAME	PAULEN, KEITH		1.2 N/	AME				
STREET ADDRESS	4318 SW 147TH PL		1.3 SI	TREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL			ITY-S	Γ- ZIP			
TITLE	TDS	☐ DETE	T€ 2.1 TI	TLE		☐ Change ☐ /	Addition	
NAME	PAULEN, JACQUES		22 N/	AME			1	
STREET ADDRESS	19705 W. LAKE DRIVE		2.3 \$1	TREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.40	ITY-S	T-71P			
TITLE		DELE				Change	Addition	
NAME			32 N/	AME			• .,	
STREET ADDRESS					ADDRESS		ſ	
CITY-ST-ZIP			3.4. C		1			
TITLE		☐ DELE			1- FIL.	☐ Change ☐ /	Addition	
NAME			4.2 N			_ orange _ ,	TOUILEDII	
STREET ADDRESS								
1					ADDRESS		[	
CITY-ST-ZIP		Det et	4.4 CI		- ZIP			
TITLE		☐ DELE				☐ Change ☐ A	Addition	
NAME			5.2 N/					
STREET ADDRESS			5.3 ST	REET	ADDRESS	•	1	
CITY-ST-ZIP			5.4 CI	ty-st	i-ZIP	·		
TATLE		DELE"	TE 6.1 TI	TLE		Change A	Addition	
NAME			6.2 NA	AME				
STREET ADDRESS			6.3 ST	REET	ADDRESS			
CITY-ST-7IP				TV CT			ľ	

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 eath; that I am an officer or director of the corporation or the receptor of the corporation of the receptor of the corporation or the receptor of the corporation or the receptor of the corporation of the receptor of the receptor of the receptor of the receptor of

SIGNATURE.

Janques Poulos 3/2/02 Och mane

CH2E034 (10/97)