## 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

**FILED** 

Mar 30 1998 8:00am

Secretary of State

**DIVISION OF CORPORATIONS** 

**DOCUMENT #** 

1. Corporation	on Name "IVIOO4	01 (4)			J		
HANLO	N/FORD ENTERPRISES, I	NC.					
					A HAR INA HI BAL AT DO SENT AND IN CONTROL	ARE GARDE BIRNI RARIO RARDI RERNE GERLE LARIE	
į							
Principal Plac	ce of Business	Mailing Address			- I INGINALI FOR BRIDE ADIRE AIREA DREAD I	THE BORDE DINGS NEWS NIGHT NIGHT DENS DENS FANT	
700 SOUTH	OCEAN BLVD	700 SOUTH OCEAN BI	νħ				
SUITE 504							
BOCA RATON FL 33432 BOCA RATON FL 33432			2		DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualified		
A Dringing F	New of Business	On Mailing Address	<del></del>	<del></del>	09/01/1987		
2. Principal Place of Businoss 2a. Mailing Address				4. FEI Number	Applied For		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		65-0053953	Not Applicable  \$8.75 Additional		
22	π, <del>σι</del> ο.	27			5. Certificate of Status Desired	Fee Required	
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	_ <del></del>	8. This corporation owes or has p		
24	25 29 30			Personal Property Tax due June 30. X Yes No			
	g, Name and Address of Curr			····	10. Name and Address of New R		
нс	GAN, GARLAND		81	Name			
852 N.E. 20TH AVENUE			82	Stroot Addr	ess (P.O. Box Number is Not Accepta	bla	
	LAUDERDALE FL 33304		62	Stieet Addit	ess (F.O. Box Number is Not Accepta	.ble)	
٠٠'	. Drobelibace 1 c 00004		83				
			84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Stat	utes, the above	e-named corp	oration submits this statement for the	purpose of changing its registered	
office or i	registered agent, or both, in the Sta am familiar with, and accept the obli	ite of Florida. Such change wai ligations of Section 607,0505	s authorized by Florida Statutes	the corporati	oration submits this statement for the on's board of directors. I hereby acce	pt the appointment as registered	
SIGNATURE	and decopy the ob-	igations of bootion borribbob,	Tonda Otatolos	<b>.</b>			
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (N	OTE: Registered Age	ent signature require	ed when reinstating)	DATE	
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	101		1.1 TITLE			☐ Change ☐ Addition	
NAME	HANLON, MARGUERITE M		1.2 NAME				
STREET ADDRESS 700 S OCEAN DR, #504			1.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY- ST	T-ZIP			
TITLE		DELETE	2.1 TITLE			Change Addition	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2. 4 CiTY - S	ST-ZIP			
TITLE	E DELETE		3.1 TITLE			☐ Change ☐ Addition	
NAME	IAME		3.2 NAME				
STREET ADDRESS	REET ADDRESS		3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	ST - ZIP			
TITLE	DELETE 41		4.1 THTLE			Change Addition	
NAME			4.2 NAME			•	
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST	Y-ZIP	_			
TITLE		☐ DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
		5.3 STREET	ADDRESS				
CITY-ST-ZIP	<b>■</b>		5.4 CITY - ST	1			
TITLE			6.1 TITLE			Change Addition	
NAME	<b>1</b>		6.2 NAME			<u>-</u>	
STREET ADDRESS	}		6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST				
	certify that the information supplied	with this filing does not qualify			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 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.