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 # M5862 1. Corporation Name CHROMATEK OF BROWARD, INC M58623

(3)

Mar 27 1998 8:00am	1
Secretary of State	

OTHION	MATERIAL DIOMAND, INC	•							
Principal Plac	e of Business	Mailing Address				- 10010311 181 81181 1811 81118 11948 11	11 BIBST BIBST B	iali Biait Ribi	I ANDI INDI
C/O JOAO C	. CASTRO	C/O JOAO C. CASTRO			ı				
-0242-N.E. 12-	AVE- new address	5 - 8242 N.E. 12 AVE		o ad	dness				
-OAKLAND-PA	RK-FL 8393 4	- OAKLAND PARK FL 800	134			DO NOT WRITE	IN THIS S	PACE	
						3. Date Incorporated or Qualified 09/04/1987			
2. Principal P	lace of Business	<u>├─</u> ─				4. FEI Number Applied For			
	Powerline Road		1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4			65-0004251			ol Applicable
Suite, Apt.	#, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
22		27							equired
City & State	├- q -					6. Election Campaign Financing	_		May Be
23 Ft.]	Lauderdale, FL Country	Pt. Laude	lerdale, FL Country			Trust Fund Contribution			to Fees
	├ ── ′	29 33309		USA		This corporation owes or has pa Personal Property Tax due June	_		iangible No
24 3330	g. Name and Address of Curre		30) (USA		10. Name and Address of New Re	- 45		7100
CA	STRO, JOAO C.			81 Na	ame			••••	
	12 N.E. 12 AVE	address		00 0		(0.0 0.00)			
	KLAND PARK FL 33334			82 St	reel Addre	ss (P.O. Box Number is Not Acceptal	чеі		
				83					
				84 Ci	tv			85 Zip	Code
				1 1	•		<u>FL</u>		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the a	bove-na	med corpo	ration submits this statement for the pon's board of directors. I hereby acce	ourpose of	changing it	s registered
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, F	lorida Sta	tutes.	Corporatio	The Board of directors. Thereby door	or the appe	and north do	TO GISTOTO S
SIGNATURE									
	Signature, typed or printed name of registered ag	gnet and title it applicable. (NO NO DIRECTORS	TE Registere	d Agent sig	nature required	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIDECTOR	20 151 40
12. TITLE	D OFFICEAS AF	DELETE	111	ITI E	P	ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	CASTRO, JOAO C.				1 -		•	Circula.	
STREET ADDRESS	-8242 N.E. 12 AVE new	s address		1.2 NAME 1.3 STREET ADDRESS		STRO, JOAO C.	_		
CITY-ST-ZIP	OAKLAND PARK FL			TY-ST-ZIF	34	00 Powerline Road			
TITLE	TS TS	DELETE	2.1 T		15.0	. Lauderdale, FL	333	Change	Addition
NAME	CASTRO, ROSA L.		2.2 N		TS		7	K	
STREET ADDRESS	ORTH NE. 12-AVE new	address		TREET ADDE		STRO, ROSA, L.	_		
CITY-ST-ZIP	OAKLAND PARK-FL			CITY-ST-ZII	34	00 Powerline Road	1 I	•	-
TITLE		DELETE	3.1 T		F.C	. Lauderdale, FL	- 333	0.9 Change	Addition
NAME		-	3.2 N						
STREET ADDRESS				TREET ADDE	RESS				1
CITY-ST-ZIP			3.4. (CITY-ST-ZII	,				
TITLE		DELETE	4.1 T					Change	☐ Addilion
NAME	15.		4. 2 1	IAME					ľ
STREET ADDRESS			4.3 \$	TREET ADDE	RESS				
CITY-ST-ZIP			; 4.4 C	ITY - ST - ZIP		<u>*</u>			
TITLE		DELETE	5.1 T	TLE				Change	Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET ADDR	RESS				
CITY-ST-ZIP			5.4 C	ITY-ST-ZIP					
TITLE		DELETE	6.1 T	TLE				Change	Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET ADDF	iess				
OITY PT 3ID			0.40	מול דם עלו	l l				

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 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 it changed or on an attachment with an address

SIGNATURE

3-23-98

(954) 566-1082