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 # 1. Corporation Name

(7)

Principal Place of Business Mailing Address 4700 SHERIDAN ST #S HOLLYWOOD FL 33021 US WHITEBOOK PROPERTIES CORPORATION Mailing Address 4700 SHERIDAN ST #S HOLLYWOOD FL 33021 US								DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
								10/07/1987	00		
2. Principal F	Place of Business		2a. Mailing Address					4. FEI Number		TA	Applied For
21			26	26				65-0007786		- H	Not Applicable
Suite, Apt	. #, etc.			Suite, Apt. #, etc.				Certificate of Status Desired		\$8.75	Additional
22		<u> </u>	27					6. Certificate of Status Desired		Fee P	Required
City & Star	10		\rightarrow	City & State				6. Election Campaign Financin	· —		О Мау Ве
Zip							(Trust Fund Contribution			l to Fees
24	25	Country	\vdash	29 30			,	 This corporation owes or hat Personal Property Tax due. 	-		ntangible No
9, Name and Address of Current Registered Agent						1		10. Name and Address of New Registere® Agent			
WHITEBOOK, ROBERT A.							Name				
	700 SHERIDAN					Ctroot Addes	co (D.O. Day Alymbay is Alah Assessable)				
#	S					Sireet Addre	ss (P.O. Box Number is Not Acceptable)				
H	OLLYWOOD FL				83						
						84	City			es Zio	Code
						· ·		F	L `		
office or agent. I a	registered agent, am familiar with, a	or both, in the State and accept the oblig	e of Florida jalions of, S	Such change was Section 607.0505, F	s authorize Florida Stat	d by tutes	e-named corporations. The corporations. The corporations are sequired and signature required and signature requi	ration submits this statement for ton's board of directors. I hereby a	ne purpose ccept the ar	or changing opointment as	its registered s registered
12.	-	OFFICERS AN	D DIRECT		13.		 	ADDITIONS/CHANGES TO O		ND DIRECTO	RS IN 12
TITLE	D			DELETE	1.1 10	TLE	-			Change	Addition
NAME		K, ROBERT A.			1.2 N/	AME					
STREET ADDRESS	HOLLWHOOD EL		1.3 S			AEET	ADDRESS				
CITY-ST-ZIP	HOLLYWOL	JU FL			1.4 CI		T-ZIP				
TITLE				∐ DELE te	2.1 T/					L Change	☐ Addition
NAME						2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	i										
CITY-ST-ZIP TITLE				DELETE	2.4 C		ST-ZIP			Change	Addition
NAME					3.1 N					□ cirango	Addition
STREET ADDRESS	!						ADDRESS				
CITY+ST-ZIP					1		ST-ZIP				
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NAME					4. 2 N	AME				_	
STREET ADDRESS					4.3 ST	REET	ADDRESS				
CITY-ST-ZIP					4.4 CI	TY-\$1	T- 71P				
TITLE				☐ DELETE	5.1 TIT	LE				☐ Change	Addition
NAME					5.2 NA	ME					
STREET ADORESS					5.3 ST	REET	ADDRESS				
CITY-ST-ZIP					5.4 CI	IY-ST	T - ZIP				
TITLE				☐ DELETE	6.1 TIT	LE				Change	☐ Addition
NAME					6.2 NA						
STREET ADDRESS		•			8		ADDRESS				
City-St-ZiP	pertify that the info	vendon supplied w	ith the	a does not qualify:	6.4 CIT	met	ion stated in Se	ection 119.07(2)(i), Florida Statute	A 6,,-45	amelika dia adalah -	inform - !!
officer or o	on this annual red director of the color or Block 13 if chal	por or sapplementa potation at the rec	al a wual e ver or trus chmont wi	port is true and ac stee impowered to an indivises.	uvate and exacute th	tha	at my signature epod as requir	shall have the same legal effect a ed by Chapter 607, Florida Statut	is if made ups; and that	inder oath; the my name ap	at I am an

for the exemption stated in Section 119.07(2)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an appears the same legal effect as if made under oath; that I am an appears the same legal effect as if made under oath; that I am an appears in

FILED

Mar 25 1998 8:00am

Secretary of State