

CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000006154 (6)

Corporation Name

LIFT UP DAVIE BLVD., INC.

FILED
Oct 13 1998 8:00am
Secretary of State

Principal Place of Business

Mailing Address

3601 DAVIE BLVD.
FT. LAUDERDALE FL 33312

3601 DAVIE BLVD.
FT. LAUDERDALE FL 33312

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

8. Name and Address of Current Registered Agent

COX, JAMES A
3601 DAVIE BLVD
FT. LAUDERDALE FL 33312

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME D [] DELETE

NAME RUSSO, DIANE

STREET ADDRESS 3529 SW 12TH CT.

CITY-STATE-ZIP FT. LAUDERDALE FL 33312

NAME D [] DELETE

NAME COX, JAMES A

STREET ADDRESS 3601 DAVIE BLVD.

CITY-STATE-ZIP FT. LAUDERDALE FL 33312

NAME D [] DELETE

NAME VANDENHOUTEN, J. LEE

STREET ADDRESS 3601 DAVIE BLVD.

CITY-STATE-ZIP FT. LAUDERDALE FL 33312

NAME [] DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME [] DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME [] DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

[] Change [] Addition

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SIGNATURE:

Rev. James A. Cox

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/98

954/791-8210

Date

Daytime Phone #