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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name
DANCERS CHOICE

(3)

FILED
Jan 21 1998 8:00am
Secretary of State

DANGE	HS CHOICE THAVEL, IN	10.				
Principal Plac	e of Business	Mailing Address				Oùl Desel 100
•	RESS CREEK RD	~	S CREEK RD #4	10		
410	iedo Greek rio	FT. LAUDERDAL		••		
FT. LAUDERDALE FL 33309				DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualified 02/14/1992	
2. Principal P	lace of Business	2a. Mailing Addre	∋ss	 .	4. FEI Number	pplied For
21		26			58-1966385	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.			Additional
22		27			Fee I	Required
City & State			City & State			May Be
23		28				to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes or has pald the current year in	
24	25 25 Name and Address of Cu	29 Agent Peristered Agent	30		Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	∐ No
90		irent negistered Agent	······	81 Name	10. Maine and Address of New Registered Agent	
	HULTZ, MICHAEL	#440		U. Ivaile		
	0 W. CYPRESS CREEK RD., : . LAUDERDALE FL 33309	#4 IU		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
r.	. LAUDENDALE PL 33309			83		····
				"		
				84 City	FL 85 Zip	Code
11 Purcuant	to the provisions of Sections 607	0502 and 607 1508 Florid	a Statutes, the a	nove-samed cor		ite registered
office or r	egistered agent, or both, in the S	tate of Florida. Such chang	ge was authorize	d by the corpora	poration submits this statement for the purpose of changing ation's board of directors. I hereby accept the appointment a	s registered
agent. I a	im familiar with, and accept the o	bligations of, Section 607.0	3505, Florida Stat	utes.	0	1
SIGNATURE	Signature, typed or printed name of registere	d agent and life if applicable	(NOTE) Benisterer	Agent signature requ	rired when reinstating) DATE	
12.		AND DIRECTORS	13.	a r gant algradato i aqu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 12
TITLE	PTDS	☐ DE	LETE 1.1 TI	TLE	☐ Change	Addition S
NAME	SCHULTZ, MICHAEL		1.2 N/	ME !		
STREET ADDRESS	500 W. CYPRESS CREEK			· · · · · · · · · · · · · · · · · · ·		
CITY-ST-ZIP		RD., #410		i		
	FT. LAUDERDALE FL	RD., #410	1.3 ST	REET ADDRESS		
TITLE	FT. LAUDERDALE FL	RD., #410	1.3 ST 1.4 CI	REET ADDRESS TY-ST-ZIP	☐ Change	Addition
TITLE NAME	FT. LAUDERDALE FL		1.3 ST 1.4 CI	REET ADDRESS TY-ST-ZIP TLE	☐ Change	Addition
	FT. LAUDERDALE FL		1.3 ST 1.4 CI LETE 2.1 TF 2.2 NA	REET ADDRESS TY-ST-ZIP TLE	☐ Change	Addition
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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 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.