FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998

DAYTONA BEACH FL

2665 S. BAYSHORE DRIVE

1260 N. ATLANTIC AVENUE

DAYTONA BEACH FL

MADORSKY

Miami Fl

MCELLIGOT

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(6)

FILED Apr 27 1998 8:00am Secretary of State



Change

Change

--04/27/98---01981---01T

Addition

Addition

Addition

Principal Place of Business 1260 NORTH ATLANTIC AVE. DAYTONA BEACH FL 32118		Mailing Address			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/30/1992		
		C/O 2665 SOUTH BAYSHORE DR. SUITE 609 MIAMI FL 33133 US					
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26	26		59-3149907	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	├ ──¬		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	7ip	Cou	untry	8. This corporation owes or has paid the	e current year Intangible	
24	25	[29]	30		Personal Property Tax due June 30.	Yes No	
g. Name and Address of Current Registered Agent				81 Name	10. Name and Address of New Registered Agent		
11, Pursuant	egistered agent, or both, in the S m familiar with, and accept the c	0502 and 607-1508, Florida Stati tate of Florida Such change was bligations of, Section 607.0505, f	s authorize	d by the corpora	rporation submits this statement for the purporation's board of directors. I hereby accept the	FL 85 Zip Code se of changing its registered appointment as registered	
DIGITATIONE	Signature, typed or printed name of registers		DIE Registere	d Agont signature requ	uired when reinstating) D/	NE .	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	DELETE	1.1 T	nre		Change Addition	
NAME	CORRIGAN, JAMES	_	1.2 N	AME			
STREET ADDRESS	5665 ISLAND PARK DRIVI	=	1.3 S	TREET ADDRESS			
CITY-ST-ZIP	MANOTICK ONTARIO CA			ITI V ST - ZIP			
TITLE	VPD	DELETE	12N T	ITLE		☐ Change ☐ Addition	
NAME	MADORSKY, MAX		22 N	AME			
STREET ADDRESS	1260 N. ATLANTIC AVE.		2.3 S	TREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		
CITY-ST-ZIP	DAYTONA BCH. FL	·······		CITY-ST-ZIP			
TITLE	VP D	DELETE	3.1 T	ITLE		☐ Change ☐ Addition	
NAME	MADORSKY		3.2 N	AME			
STREET ADDRESS	1260 N ATLANTIC AVENI	JF.	335	TREET ADDRESS			

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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STRELT ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-7IP

MADURSKY, MARSHA

MIAMI, FL

2665 S. BAYSHORE DRIVE

***150.00

4.1 TITLE

4. 2 NAME

5.1 TITLE

52 NAME

61 TITLE

6.2 NAME

DELETE

DELETE

DELETE