## 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 # P92000001461 (2)

## **PSER INVESTMENT COMPANY**

## FILED Jan 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							I umalimas und notre endti deatr matur deatr deatr deatr dunci eteri deatr deatr sibri comi			
1921 E. ATLANTIC BLVD. 1921 E. ATLANTIC BLVD.										
POMPANO BEA	POMP	POMPANO BEACH FL 33062				DO NOT MO	TE BUTUR	ODAGE		
							DO NOT WR	· ·	SPACE	<del></del>
							3. Date Incorporated or Qualifie 10/27/1992			
2. Principal Place	of Business	2a. Mailin	g Address				4. FEI Number			Applied For
21	26	26				65-0371719	,	. —	Vot Applicable	
Suite, Apt. #, et	Suite,	Suite, Apt. #, etc.						\$8.75	Additional	
22	27					5, Certificate of Status Desired			Required	
City & State	City &	City & State				6. Election Campaign Financing \$5.00 May Be				
23			28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		<del></del>	untry		B. This corporation owes or has	•	/ `	
24	25	[29]		30	<del></del>		Personal Property Tax due Ju			□ No
g. Name and Address of Current Registered Agent						Name	10. Name and Address of New	Hegistered	Agent	
Leshin, randall l 1921 e atlantic blyd					81	vaine				
					Street	Address (P.O. Box Number is Not Accep	ess (P.O. Box Number is Not Acceptable)			
POM										
					83					
					84	City		FL	85 Zip	Code
#4 Dureugot to the	e provisions of Sections 607 050	32 and 607 150	P. Elorido Statute	on the	hour	nomod	corporation submits this statement for the		f changing	ito registered
office or regist	tered agent, or both, in the State miliar with, and accept the oblig	e of Florida. Suc	:h change was a	authorize	ed be	the carr	poration's board of directors. I hereby acc	ept the ap	pointment a	s registered
SIGNATURE	miliar with, and accept the oblig	janois on occin	on 007.0000, 110	AIGE OF	aluica					
Signa	ture, typed or printed name of registered ag	ent and title if applica	ble (NOTE	: Register	ed Age	nt signature	required when reinstating)	DATE		
12.		ID DIRECTORS		13.	· - · · ·		ADDITIONS/CHANGES TO OF	ICERS AN		
TITLE	PD		☐ DELETE	1.11	TITLE				Change	Addition
NAME	ELIE, RICHARD G			1.21	NAME					;
STREET ADDRESS	1919-C E ATLANTIC BLVD			1.3 9	STREET	ADDRESS				i
CITY-ST-ZIP	POMPANO BEACH FL 3300	52	<b>—</b>		CITY-S	T - ZIP				
TITLE			☐ DELETE		TITLE				L Change	Addition G
NAME				2.21	NAME					
STREET ADDRESS				2.3 9	STREET	ADDRESS				
CITY-ST-ZIP			Delete	_	CITY-S	iT - ZIP				1.400
TITLE			☐ DELETE	3.1 1					☐ Change	☐ Addition
NAME					NAME					
STREET ADDRESS						ADDRESS				1
CITY-ST-ZIP TITLE			DELETE	3.4. 4.1 T	CITY-S	I - ZiP			Change	Addition
			L. Decere						criange	LI HOURIUN
NAME execut annuesee					NAME TOTET	ADDRESS				j
STREET ADDRESS CITY-ST-ZIP					JITY-SI	ADDRESS				
TITLE		<del></del>	DELETE	5.1 T		1 - ZIP			Change	Addition
NAME				5.2 N					- Vilaligo	
						ADDDESS				
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP TITLE			DELETE	5.4 C	ITY-SI	1-211	· · · · · · · · · · · · · · · · · · ·		Change	Addition
İ			PECCIE						- Johange	
NAME STREET ADORESS				6.2 N		* UDDOECE				
STREET ADORESS						ADDRESS				
CITY-ST-ZIP	that the information supplied :	ith this filing do	oo not a vality to		ITY ST		nd in Costion 110 07/9/(i) Elevida Statuton	I forther or		. information

4. 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 requirer 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.

CARAMO O GO: Par O'L 1298 (GOO) QUA. G