## 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 # P92000009432 (5)

KEVIN D. WILKINSON, P.A.

**FILED** Apr 30 1998 8:00am Secretary of State

|--|--|--|--|

Principal Place of Business Mailing Address					- E ADDIADOS SIA ADAID DIBIS DONIN BOSIS DERIK DESKA DESKA	ANTH BINGS	HINE HER HUDI				
12794 W FOF	REST HILL BL	VD	12794 W	FOREST HILL B	LVD						
28-8	054011.51.01	2414	26-B		22444			DO NOT WRITE IN THIS SPACE			
WEST PALM US	BEACH FL 3	9414	US	ILM BEACH FL 3	33414			3, Date Incorporated or Qualified			
••			••					12/04/1992		}	
2. Principal P	lace of Busin	ness	2a. Mailing	Address				4. FEI Number	1	Applied For	
21			26					65-0373933	1	lot Applicable	
Suite, Apt.	#, elc.		Suite,	Apt. #, etc.				5. Certificate of Status Desired		Additional	
22			27					S. Continued of States Seemed		Required	
City & State	e		Crty &	State				6. Election Campaign Financing Trust Fund Contribution		May Be	
<b>23</b> Zip		Country	26 Zip		Coun	trac	<del></del>			to Fees	
24		25	29		Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No			
24	o Name	and Address of Cu		gent	[30]	10. Name and Address of New Registered Agent					
wı	LKINSON, I		<u> </u>	<u> </u>	1	31	Name				
		REST HILL BLVD			١,	82 Street Address (P.O. Box Number is Not Acceptable)					
E .	28-B			"	Stiest Addie	as (F.O. Dox Mulliber is 140) Populable					
WE	EST PALM	BEACH FL 33414			Ī	13					
					-  -	34	City		85 Zip	Code	
			_			-  -	•	FL			
11. Pursuant	to the provis	ions of Sections 607.	0502 and 607.1508 tate of Florida, Suc	3. Florida Statute	es, the abo	bve-	named corpo	pration submits this statement for the purpose of on's board of directors. I hereby accept the appo	changing intment a	its registered is registered	
agent. I a	ım familiar w	th, and accept the o	hligations of, Section	n 607.0505, Flo	orida Statu	tes.	ino oo.po.a	5.70 500.0 o. 5.1000.0			
SIGNATURE								d when reinstating) DATE			
12.	Signature, typed	or printed name of registere	AND DIRECTORS	AB (NOTE	13.	Agent	s signature required	d when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12	
TITLE	PSTD	<u> </u>	VIII OTOTIO	DELETE	1 1 1111	E		755 Hotto, or a trace to difficultive	Change		
NAME		SON, KEVIN D			1.2 NAN	(E	ŀ				
STREET ADDRESS		N FOREST HILL B	LVD., #28-B		1.3 STR	EET A	NDDRESS				
CITY-ST-ZIP	WEST F	PALM BEACH FL			1.4 CIT	/- ST-	- ZIP				
TITLE				DELETE	2.1 TITL	E			Change	Addition	
NAME					2.2 NAA	<b>AE</b>	1				
STREET ADDRESS					2.3 STR	EET A	ADDRESS	S			
CITY-ST-ZIP					2. 4 CIT		r- ZIP			T 1 4450	
TITLE				☐ DELETE	3.1 TITE				Change	Addition	
NAME					3.2 NAA	_					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	ļ <u>.</u>			DELETE	3.4. CIT 4.1 TITL		- ZIP		Change	Addition	
TITLE					4.2 NA			•			
STREET ADDRESS							NDDRESS .			i	
CITY-ST-ZIP					4.4 CIT						
TITLE				DELETE	5.1 TITL	_	- Lir		Change	Addition	
NAME					5.2 NAM				_		
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					5.4 CIT						
TITLE	1			DELETE	6.1 TITL				Change	Addition	
NAME	1				6.2 NAM	Æ					
STREET ADDRESS	1				6.3 STR	EET A	LODRESS .				
CITY-ST-ZIP	<u> </u>				6.4 CIT	Y- ST	- ZIP				

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

SIGNATURE:

4/124/98

561.7537200