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

.PROFIT Apr 24 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P92000013635 (7) CORAL LAKE V. INC. Principal Place of Business Mailing Address 2255 GLADES RD 2255 GLADES RD STE 301 E STE 301 E DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33431 BOCA RATON FL 33431** 3. Date Incorporated or Qualified 12/23/1992 2. Principal Place of Business
21 1499 W. Palmetto Park Road 2a. Mailing Address 26 1499 W. Palm Ho Park Road Applied For 65-0383489 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Snitc Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Florida Florida Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 25 Name and Address of Current Registered Agen 10. Name and Address of New Registered Agent 81 Name KODSI & EINSTEIN PA 701 WEST CYPRESS CREEK RD 82 Street Address (P.O. Box Number is Not Acceptable) STE 302 83 FT LAUDERDALE FL 33309 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTL: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE KODSI, JOSEPH NAME 1.2 NAME 2255 GLADES RD STE 301 E STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME STREET ADDRESS 3.3-STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change 41 TITLE Addition Addition TITLE MAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-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 attal timent with an address.

HIDLAG

Wal-347-60111

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