SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000013594 (5)

FILED Aug 10 1998 8:00am Secretary of State

1. Corporation C S F &	g Address Ayview DR O DUERDALE FL 33304				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1993						
2. Principal Place of Business			<u> </u>	2a. Mailing Address				4. FEI Number	. FEI Number Applied		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				65-0387322 Not Applica 5. Certificate of Status Desired \$8.75 Additione			Not Applicable 5 Additional	
City & State			27					Fee Required			
23	City & State			City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip		Country	Zip		Cour	ntry		8. This corporation owes or has	paid the c		
24	25		29		30			Personal Property Tax due Ju		Yes	∐ No
KUR	DIAN, GREGO	Address of Cui	rrent Registered	Agent		81	Name	10. Name and Address of New I	Registere	d Agent	
1201 RIVER REACH DRIVE SUITE 106 FT LAUDERDALE FL 33315							Street Addre	ress (P.O. Box Number is Not Acceptable)			
agent. I a SIGNATURE	am f am iliar with,	and accept the ol	bligations of, sec	tion 607.0505, F	Torida State	utes.		ration submits this statement for the pon's board of directors. I hereby acce		changing its ointment as	registered registered
agent. I a SIGNATURE	Signature, typed or pri	and accept the ol	bligations of, sec	able. (N	Torida State	utes.		ration submits this statement for the pon's board of directors. I hereby accented when reinstating) ADDITIONS/CHANGES TO OF	DATE		
Agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or pri CD FRENTZ, CH. -1101 NE 6TH	and accept the ol nted name of registered OFFICERS ARLES S	bligations of, sec	able. (N	NOTE: Register 13. 1.1 TiT 1.2 NAI 1.3 STE	red Age TLE ME REET AC	int signature requ	ired when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS A	AND DIREC	TORS IN 12
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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 trusted 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 for on an attachment with proaddress.

IGNATURE:

| Comparison of the corporation or the receiver or trusted 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 for on an attachment with proaddress.

CSF & COMPANIES

BJ

Florida Department of State Divisions of Corporations P.O. Box 6327 Tallahasse, Florida 32314

7/24/98

To Whom It May Concern:

As per my conversation with Tanya at your good offices on 7/22, I am sending you a check for \$150.00 for my Florida State filing fee for my corporation CSF & Companies, Inc., FEI number 65-0387322.

I did not receive a first notification from your offices and I sincerely request that you not penalize my company a late fee. As a small business owner, I personally handle all these reports and I assure you I did not receive an initial 1998 Profit Corporation Annual Report packet.

Your consideration in this matter is appreciated.

Thank you.

CSF & Companies

Abt/csf