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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

ANCHOR VENTURES OF FLORIDA, INC. Principal Place of Business I14 SW 10th STREET SORT LAUDERDALE PL 33315 US SUB-Applied For State PORT Port Port Port Port Port Port Port	DOCU	MENT # P9300(0015144 (7)				
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Trust Fund Contribution Added to Pees Ad	22		+		5. Commodite of Quada Desired	Fee Required	
28	City & Stat	e					
9. Name and Address of Current Registered Agent YONGE, MARK W 849 S.W. 81H TERR FORT LAUDERDALE FL 33315 88 Street Address (P.O. Box Number is Not Acceptable) 89 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Fixerida Stetutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Foods. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent at an attention with, and accept the obligations of, Section 607 0505. Priorida Statutes SIGNATURE Signature Injuries with, and accept the obligations of, Section 607 0505. Priorida Statutes SIGNATURE 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. Intil R. OR SEA BRIGHT NJ 1.1 TITLE	· ·	Country	——¬ ' ⊢		8. This corporation owes or has paid the cu		
YONGE, MARK W 649 S.W. 81H TERR FORT LAUDERDALE FL 33315 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 05.02 and 607 15.08, Fixinds, Status, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fixida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607 05.05, Fixida Status, the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607 05.05, Fixida Status. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICE RS AND DIRECTORS IN 12 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICE RS AND DIRECTORS IN 12 12. TITLE OFFICE RS AND DIRECTORS IN 12 12. OFFICE RS AND DIRECTORS IN 12 12. OFFICE RS AND DIRECTORS IN 12 12. OFFICE RS AND DIRECTORS IN 12 13. SIRRET ADDRESS OFF. 51.2P 14. CIVE ST. ZP 14. CIVE ST. ZP 15. Change Addition Addition MAE SIRRET ADDRESS OFF. 51.2P 16. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. LAUDERDALE FL 18. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. CIVE ST. ZP 19. CIVE ST. ZP 1	24			30			
### FORT LAUDERDALE FL 33315 ### City			t Hegistered Agent	81 Namo	10. Name and Address of New Registered	Agent	
FORT LAUDERDALE FL 33315 88				I Name			
### City ### B\$ Zip Code 11. Pursuant to the provisions of Scotions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Ferda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent an familiar with, and accept the obligatives of, Section 607 0505, Floridad Statutes. SIGNATURE Signature spend or protect during dispersed agent as title 3 registered MOSE Registered Agent signature required when rerelating) DATE					ress (P.O. Box Number is Not Acceptable)		
1. Pursuant to the provisions of Sectione 607 0502 and 607 1508. Florida Statules, the above named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Honda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statules. SIGNATURE				83	-		
11. Pursuant to the provisions of Sections 607 (509 and 607 (509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered affect or registered agent. I am familiar with, and accept the obligations of, Section 607 (505, Florida Statutes) SIGNATURE Signature OFFICE IIS AND DIRI CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE	1			84 City	Ei	85 Zip Code	
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, types or princh have of important agent and tit if approache. (MOTE Registered Agent agentage imported adent reinstanting). DATE 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE VONGE, MARK W 449 SW 8TH TERR 13 STREET ADDRESS SEA BRIGHT NJ 14 CITY-ST-ZIP TITLE ST VONGE, HOPE L 498 SW 8TH TERR 22 NAME 22 NAME 23 STREET ADDRESS DIY-ST-ZIP TITLE DELETE 31 TITLE DEL	11. Pursuant	to the provisions of Sections 607 0503	2 and 607 1508. Florida Statute	s the above-named corr	poration submite this statement for the number of	f changing its registered	
CASE Register Course (primer former despotence) DATE	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.						
12.	SIGNATURE	Signature, typed or printed name of registered age	or and tile diapplicable (NOTE	Registered Agent signature requir	red when reinstating) DATE		
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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.

FILED

May 01 1998 8:00am

Secretary of State