## 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 # P93000028650 (8)

JEFFREY S. KURTZ, P.A.

**FILED** May 11 1998 8:00am Secretary of State

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Principal Place	e of Business	Mailing Address			itel Onits tento entin melst milit met innt:
1200 CORPORATE WAY CENTER SUITE 201 WELLINGTON FL 33414 US		1200 CORP. CENTER WAY SUITE 201 WELLINGTON FL 33414 US		DO NOT WRITE IN THIS SPACE	
,00		03		3. Date Incorporated or Qualified 04/16/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /223	so Forest Hill Blod	26 12230 Farest	Hill Blod	65-0403145	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
	re 1106	27 Suite 110 6			Fee Required
City & State	lington, FL	City & State  28 Wellington	,FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3 3 3 1	Country 25 U.S.	Zip 29 33414 30	Country	8. This corporation owes or has p	' ' I
24 334	9. Name and Address of Current		u.s.	Personal Property Tax due Jun  10. Name and Address of New R	
KURTZ JEFFREY S  61 Name Jeffrey S. Kut-					
	4000 GODGODATE OFFITED WAY			ess (P.O. Box Number is Not Accepta	hia)
SUITE 201			1'3	29 Torrington	Ave
WE	LUNGTON FL 33414		83	7	
			84 City	11. 1	85 Zip Code
dd Disament	to the security of Castions COZ OCOZ	and CO7 4000 Florida Chaldra	the share a small same	ellington	FL BSGG
office or r	to the provisions of Soctions 607.0502 ogistered agent, or both, in the State o m familiar win, and accord the suppart	f Florida, Such change was auth	norized by the corporati	ion's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
	m targilar ///n, and accord the policial	ons of Section 607.0505, Florid	a Statutes.	4/30	3/98
SIGNATURE	Control, ly od or printed name of registered agent	and little if applicable (NOTE: Re	ogistered Agent signature require	ed when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PVST Kurtz, Jeffrey S esq.	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME OTOTET ADODGGG	1329 TORRINGTON LANE		1.2 NAME		
STREET ADORESS CITY-ST-ZIP	WELLINGTON FL 33414		1.3 STREET ADDRESS 1.4 CHY-S1-ZIP		
TITLE		DELETE	2.1 TiTLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		*
CITY-ST-ZIP		<u></u> -	2.4 CITY-ST-ZIP	· ·	¥1
TITLE		[_] DELETE	3.1 TITLE		Change  Addition
NAME (		ļ.	3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP Title		☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		Бисте	4.2 NAME		Contained Expression
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 THILE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-7IP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby 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