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PROFIT CORPORATION ANNUAL REPORT

1998

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CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000030141 (4)

POSITIVE CONNECTIONS, INC. Principal Place of Business Mailing Address 6278 N. FEDERAL HWY 6278 N. FEDERAL HWY SUITE 155 SUITE 155 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/21/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0404863 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zio Country Zio Country 8. This corporation owes or has paid the current year Intangible 30 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FEIG. MARC 1 8000 PETERS RD. 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 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 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. (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. **DPS** DELETE Change Addition TITLE 1.1 TITLE KEITER, JOEL E 1.2 NAME KEITER, FOEL E NAME 1340 S. OCEAN BLUD. UNIT 1902 1010 S. OCEAN BLVD., UNIT 1005 STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33062 POMPANO BENCH FL 33062-6968 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE GEORGE, G Y GEORGE, GY 9625 RIVERSIDE DR., D-4 2.2 NAME NAME 9089 SW 1ST ST. STREET ADDRESS 2.3 STREET ADDRESS BOCA RATON FL 33428 CORAL SPRINGS FL 33071 CITY-ST-ZIP 2. 4 CHTY-ST-ZIP TITLE DELETE Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition ☐ Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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, or on an attachment with an address.