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

CORPORATION ANNUAL REPORT 1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000034662 (5)

CALDWELL & CALDWELL, P.A.

Principal Place of Business

619 SW 14TH ST BOCA RATON FL 33486

Mailing Address

619 SW 14TH ST BOCA RATON FL 33486

**FILED** Jan 30 1998 8:00am Secretary of State



NAME   CALDWELL, LINDA D   2.2 NAME   2.3 STREET ADDRESS   G19 SW 14TH ST   2.3 STREET ADDRESS   EUTY-ST-ZIP   SDCA RATON FL   2.4 CITY-ST-ZIP   STREET ADDRESS   STREET ADDRE	บร		US				DO NOT WRITE IN THIS SPACE		
2   Principal Place of Business   22   Mailing Address   52   18   18   18   18   18   18   18   1							3. Date Incorporated or Qualified		
25									
Sulte, Apt. #, etc.    Sulte, Apt. #, etc.   Sulte, Apt. #, etc.   S. Certificate of Status Desired   \$8.75 Actition, Fee Required   See Requ	_	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied	For	
City & State   City							<b>52-1829975</b> Not App	licable	
27		ot. #. etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5 Cartificate of Status Desired  \$8.75 Addition	nal	
Zip   Country   Zip   Country   S. This corporation was on has paid the current year Intamplied to Fees   Added to Fees   Added to Fees   Zip   Zip   Zip   Signature   Signature   Zip   Signature   Signature   Zip   Signature   Signature   Zip   Signature			27	27			5. Certificate of Status Desired Fee Required	<b>d</b>	
28	<del></del>		City & State	City & State			6. Election Campaign Financing \$5.00 May	Ве	
9, Name and Address of Current Registered Agent  10, Name and Address of New Registered Agent  10, Name and Address of New Registered Agent  11, Pursuant ID the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505 and 607 1508, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505 and 607 1508, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the early experience agent I am familiar with, and accept the obligations of, Section			28						
25   29   30   Personal Property Tax due June 30   Yes   No	Zip	Country	Zlp	L Cou	ıntry		8. This corporation owes or has paid the current year Intangible	le	
SI   Name	24	1201	,20,	30					
SUM   ATTH ST   BOCA RATON FL 33486	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
82 Street Address (P.O. Box Number is Not Acceptable) 83   84   City   FL   85   Zip Code   84   City   FL   85   Zip Code   85   Street Address (P.O. Box Number is Not Acceptable) 86   City   FL   85   Zip Code   87   City   FL   85   Zip Code   88   City   FL   85   Zip Code   89   City   FL   85   Zip Code   89   City   FL   85   Zip Code   89   City   FL   85   Zip Code   80   City   FL   85   Zip Code   81   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 register agent in an armider with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   Signature, hosed or private name of registered agent and title # applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register agent and title # applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register agent and title # applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register agent and title # applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register applicable   NOTE, Registered Agent algebrate when redirectors. I hereby accept the appointment as register applicable   NOTE, Registered Agent algebrate values.   NOTE, Registered Agent algebrate	J	OHN L. CALDWELL			81	Name			
BOCA RATON FL 33496  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 register 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. TITLE  PS  CALDWELL, JOHN L  12. NAME  CALDWELL, JOHN L  12. OFFICERS AND DIRECTORS  13. STREET ADDRESS  CITY-ST-2IP  BOCA RATON FL  14. CITY-ST-2IP  TITLE  VT  DELETE  1.1 TITLE  VT  DELETE  2.1 TITLE  VT  CALDWELL, LINDA D  STREET ADDRESS  619 SW 14TH ST  2.2 STREET ADDRESS  619 SW 14TH ST  2.3 STREET ADDRESS  619 SW 14TH ST  2.3 STREET ADDRESS  619 SW 14TH ST  3.3 STREET ADDRESS  619 SW 14TH ST  3.3 STREET ADDRESS  619 SW 14TH ST  4.1 TITLE  CALDWELL  DELETE  3.1 TITLE  CALDWELL  CHange  Add  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Add  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRE					92 Street Address /P.O. Roy Number in Net Acceptable)				
Signature   Sign	_	/ - /		82) Street Add			aress (P.O. Box Number is Not Acceptable)		
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11. Pursuant to the provisions of Sections 607.0502 and 607.1502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature   Sign				[	84	City	85 Zip Code		
SIGNATURE   Signature, highed or pricised agent and life if applicable   NOTE, Registered Agent algebraic required when reinstating)   DATE     12.	44 Parauor	t to the exculsions of Sections 607	OFOG and 607 1500 Florida Status						
SIGNATURE   Signature, highed or pricised agent and life if applicable   NOTE, Registered Agent algebraic required when reinstating)   DATE     12.	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								
Stort atture, typed or privated name of registered agont and title if application   NOTE, Registered Agont algorited when redicted when relatedating)   DATE	agent. I	am familiar with, and accept the o	bligations of, Section 607.0505, FI	lorida Stati	utes				
12.	SIGNATURE								
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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 decided on this applied control of 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this applied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes.	14. I hereby	certify that the information supplied	d with this filing does not qualify fo	or the exer	mptic	on stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the inform	ation	

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.