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**

| | MENT # P9300 CORPORATION | 0037563 (2 |) | | | | | |
|---|---|---|---|-----------------------|------------------------|--|---------------------------------|--|
| Principal Place of Business Mailing Address | | | | | | | 00/66 (IIII) (466) 1 | HIER BIERR HEIT ERRI |
| , , | ISEN BEACH BLVD | 746 N.E. JENSEN BEACH BLVD JENSEN BEACH FL 34957 US | | | DO NOT WRITE IN | N THIS SPACE | | |
| | | •• | | | | 3. Date Incorporated or Qualified | | |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | | 05/21/1993 4, FEI Number | | Applied For |
| 21 | | 26 | 7 ~ ~ | | | 65-0419743 | - | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | 75 Additional |
| City & Stat | 0 | City & State | | | | | F | ee Required |
| 23 | G | 28 | | | | Election Campaign Financing Trust Fund Contribution | | .00 May Be |
| Zip | Country | Zip | Cou | intry | | 8. This corporation owes or has paid | - | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June 30 | o. 🔲 Yés | □No |
| | 9. Name and Address of Curre | nt Registered Agent | | | | 10. Name and Address of New Regis | stered Agent | |
| MANDLE, BARBARA M 9960 S. OCEAN DRIVE, #1804 JENSEN BCH. FL 34957 | | | | 81 | Name | | | |
| | | | | 82 | Street Ad | dress (P.O. Box Number is Not Acceptable) |) | |
| | 10211 00111 12 01001 | | | 83 | | | | |
| | | | | 84 | City | | las l | Zip Code |
| | · | | | | | | FL 85 | • |
| 11. Pursuant office or r agent. La | to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig | 02 and 607.1508, Florida Stati of Florida. Such change was ations of, Section 607.0505, F | utes, the al s authorized lorida Stat | oove d by utes. | named co the corpor | orporation submits this statement for the pur ation's board of directors. I hereby accept t | pose of chang the appointme | ing its registered nt as registered |
| SIGNATURE | Signature, typed or printed name of registered ag- | | 275 D | | | | | |
| 12. | | D DIRECTORS | OTE Registered Agent signature require 13. | | i signature req | ADDITIONS/CHANGES TO OFFICER | DATE RS AND DIREC | CTORS IN 12 |
| TITLE | D | DELETE | 1.1 Til | ſLŧ | · I | TIDDITIONS OF THE EXPLANATION OF | Cha | |
| NAME | MANDLE, BARBARA M | | 1.2 NA | 1.2 NAME | | | | |
| STREET ADDRESS | 9960 S. OCEAN DR APT. 180 | 04 | 1.3 ST | 1.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | JENSEN BCH. FL | | 1.4 CI | 1Y-S1 | - ŻIP | | | |
| TITLE | D Sales, Jose | ☐ DELETE | 2.1 TII | | ŀ | | ☐ Cha | ange L Addition |
| NAME | 9960 S. OCEAN DR. APT 180 | M | 2.2 NA | | | | | |
| STREET ADDRESS | JENSEN BCH. FL | 77 | | | ADDRESS | | | |
| CITY-ST-ZIP TITLE | | DELETE | 2 4 C 3.1 1/1 | | - ZIP | | Cha | ange Addition |
| NAME | Size (C | | | 3.2 NAME | | | One | nge recomon |
| STREET ADDRESS | | | | - | DDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CI | | | | | |
| TITLE | | DELETE | 4.1 1/1 | LE | | | Cha | inge 🔲 Addition |
| NAME | | | 4. 2 N | AME | | | | |
| STREET ADDRESS | | | 4.3 ST | REET A | DDRESS | | | |
| CITY-ST-ZIP | | DELET E | 4.4 CI | | ZIP | | 0. | THE AMERICA |
| TITLE | | | 5.1 717 | | ĺ | | ☐ Cha | inge L Addition |
| NAME STREET ADDRESS | | | 5.2 NA | | DDRES\$ | | | |
| CITY-ST-ZIP | | | 5.4 CII | | 1 | | | |
| TITLE | | DELETE | 6 1 TH | | 2.11 | | Cha | inge Addition |
| NAME | | | 62 NA | | | | - | |
| STREET ADDRESS | | | | | DDRESS | | | |
| OITY 67 7/D | | | | | | | | |

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 op an attachment with an address.

FILED

Apr 06 1998 8:00am

Secretary of State