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

PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 24 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State

	1998	TES	DIVISION OF	CORPORA	TIONS		or state
	MENT # P9300 AL CREDIT LEASING SEF		• •)		T ARRIVER I AND ARRIVE MANUE FROM ARRIVE SEAL REPORT	INGA KANDI INDA BAKA DAN MBA
Principal Place of Business Mailing Address							
100 E. LINTON		Ü	LINTON BLVD.				
SUITE 303A DELRAY BEACH FL 33483		SUITE 3	SUITE 303A DELRAY BEACH FL 33483			DO NOT WRITE IN TH	HIS SPACE
DECKAT BEAC	H FL 33483	DELHAT	DEENN' BENON FE 33403			3. Date Incorporated or Qualified	
						11/03/1993	
	ace of Business) · · · · ·	2a. Mailing Address			4. FEI Number	Applied For Not Applicable
Suite, Apt	#, etc	[26] Suite	Suite, Apt #, etc.			11-2981455 6. Certificate of Status Desired	\$8.75 Additional
22		27				Certificate of Status Desired	Fee Required
City & State			City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 Zip	Country	28 Ζήμ		Coun	try	8. This corporation owes or has paid the	Added to Fees
24	25	29]		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered	Agent		31 Name	10. Name and Address of New Register	red Agent
CORVINO, CATHERINE 100 E. LINTON BLVD. SUITE 303A DELRAY BEACH FL 33483						dress (P.O. Box Number is Not Acceptable)	85 Zip Code
agent i ar SIGNATURE	m tamillar with, and accept the obli- Signiture, lyped or printed name of repotered a	ganoris of, Sect	iori 607.0505, F	-iorida Statu	tes.	orporation submits this statement for the purporation's board of directors. I hereby accept the aured when reinstating) ADDITIONS/CHANGES TO OFFICERS	fE.
TITLE	P		DELETE	1.1 TITL			Change Addition
NAME STREET ADDRESS	CORVINO, CATHERINE 3577 CAPTAINS WALK			1.2 NAM	NE Eet address		
CITY-ST-ZIP	DELRAY BEACH FL				(-ST-ZIP		
TITLE			DELETE	2.1 TITL			Change Addition
NAME				2.2 NAM	1		
STREET ADDRESS					EET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	3.1 TITU	Y-ST-ZIP E		Change Addition
NAME				3.2 NAM	AE		İ
STREET ADDRESS				3.3 STR	EET ADDRESS		
CITY-ST-ZIP			Driese		Y-ST-ZIP		Change Addition
TITLE NAME			☐ DELETE	4.1 TITL 4.2 NA	- 1		Change Addition
STREET ADDRESS				•	EET ADDRESS		
CITY-ST-ZIP					r-ST-ZIP		
TITLE			DELETE	5.1 TITL			Change Addition
KAME				5.2 NAM	AE .		
STREET ADDRESS				5.3 STR	EET ADDRESS		
CITY-ST-ZIP			Driete		/-ST-ZIP		Change Addition
TITLE			DELETE	6.1 TITL	i i		Change Addition
NAME CIRCLE ADDRESS				6.2 NAM	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP					1-ST-ZIP		
14. I hereby c	ertify that the information supplied	with this liling d	loes not qualify	for the exer	notion stated	in Section 119.07(3)(i), Florida Statutes. furthe	er certify that the information
indicated	on trus arinual report or supplemen	itai annuat repo	rus true and ac	curate and	that my signa	ature shall have the same legal effect as if mad	e nunnet oam: mariam an

×2-19-98 × 274-8055