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 # P93000076575 (8)

KIRK AND ASSOCIATES, INC.

FILED Feb 20 1998 8:00am Secretary of State

MIN A	יספת טווו	JOIATES, INC.											
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5735 SW 88 COOPER CIT			5735 SW 88 AVE COOPER CITY FL 33328					DO NOT WRITE	e aka t u uc	ODACE			
									3. Date Incorporated or Qualified	2 1N 1F13	SPACE	·	
									11/01/1993				
	lace of Busi	ness	2a. Mailing Address				- 1	4. FEI Number			oplied For		
Suite, Apt.	# 010		26 Suite Apl # etc				 	65-0453410			ot Applicable		
22	#, 9 10.		Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired		
City & Stat	.8		City & State					6. Election Campaign Financing		\$5.00	May Be		
23			28					Trust Fund Contribution			to Fees		
Zip		Country	Zıp		Country				This corporation owes or has pa	aid the cu	rrent year Int	angible	
24		25	29		30		<u>-</u>		Personal Property Tax due June] No	
		and Address of Currer	nt Registered	Registered Agent			N.	10. Name and Address of New Registered Agent			Agent		
		ROW W JR.				81	Name					}	
	35 SW 88 . HOPER CIT	AVE Y FL 33328					Street A	Address	ess (P.O. Box Number is Not Acceptable)				
						83							
						84	City			FL	85 Zip (Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid							e-named of the corp s.	corporati oration's	ion submits this statement for the p board of directors. I hereby acce	ourpose o	of changing it	ls registered registered	
SIGNATURE													
	Signature, typos	for printed name of registered age				i Age	nt signature	nw beniuper	en reinstating)	DATE	D DIDEOTOR		
12. TITLE	D	OFFICERS AN	DUINECTUR	DIRECTORS DELETE			13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	JERS AN	Change	Addition	
NAME		OODROW W JR.									L Ollarige		
STREET ADDRESS 5735 SW 88 AVE				1.2 NAME 1.3 STREET ADDRESS								1	
	ITY-ST-ZIP COOPER CITY FL 33328						1.4 CITY-ST-ZIP		•			ŀ	
TITLE				DELETE	2.1 11		1-211				Change	☐ Addition	
NAME					2.2 N								
STREET ADDRESS							ADDRESS [τ',			[
CITY-ST-ZIP							ST-ZIP						
TITLE				DELETE	3111						Change	Addition	
NAME					3.2 N	ME	ļ					J	
STREET ADDRESS				3,3 STREET ADD			ADDRESS						
CITY - ST - ZIP					3.4. C	ITY-S	37-ZIP					ŀ	
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CITY-ST-ZIP					5.4 CI	_	T-ZIP						
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NAME	**				6.2 NA	ME	1						
STREET ADORESS					6.3 STREET ADDRESS								
CITY-ST-ZIP					6.4 CI	ry-s	T- ZIP						

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 of 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.

SIGNATURE:

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ECULIER D

2/16/98 (954)434-5608