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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 09 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000083620 (3)

FAT IGOR COMPANY

Principal Place of Business Mailing Address) (BANIBAR IND IDIOS TENER BOTH BOTH BOTH BOTH NUMBER IN SAINT NAME OF ILLES
4242 LARCH A 4241 LARCH A PALM BEACH US			4241 LARCH AVENUE Palm Beach Gardens FL 33418 US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
6 Principal Di	age of Dunings	2a. Mailing Address				11/30/1993 4. FEI Number Applied For
21 424/	lace of Business	26				65-0454194 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27	27			5. Certificate of Status Desired
City & State	9	City & State				B. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	<u> </u>	untry	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 Name and Address of Curr	29	30	_		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
741	·	ont negistered Agent		81	Name	10.
ZARETSKY, RICHARD P 1655 PALM BEACH LAKES BLVD.				L.	0:	Add and (D.O. Daw Market and Market Association)
SUITE 900				82	Street A	Address (P.O. Box Number is Not Acceptable)
W PALM BEACH FL 33401				83		
, , ,				84	City	■ 85 Zip Code
				"	\(\)	FL 12 24 0000
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 a	igent and little if applicable	(NOTE: Flegisler	ed Age	ent signature n	required when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELET	TË , 1,11	TITLE		Change Addition
NAME	LEWIS, TOBY		1.21	NAME		
STREET ADDRESS 4241 LARCH AVENUE		****	1.3 3	1.3 STREET ADDRESS		
CITY-ST-ZIP PALM BEACH GARDENS FI				1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
TITLE		☐ DELET				C Suprige C Assertan
NAME				NAME Expect	ADDRESS	
STREET ADDRESS					ST-ZIP	
CITY-ST-ZIP TITLE		DELE1		TITLE	31-21	Change Addition
NAME			3.2	NAME		
STREET ADDRESS			3.3 3	STREET	ADDRESS	
CITY-ST-ZIP			3.4.	CITY-	ST-ZIP	
TITLE		☐ DELET	TE 4,1 1	TITLE		Change Addition
NAME			4. 2	NAME		
STREET ADDRESS			4.3 3	STREET	ADDRESS	
CITY+ST-ZIP				CITY-S	ST-ZIP	Change Addition
TITLE		☐ DELET		TITLE		L Change L Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		☐ DELET		CITY-S TITLE	01-217	☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	
CITY_ST. 7IP			644	CITY - S	T-71P	
14. hereby c	ertify that the information supplied	with this filing does not qu	alify for the ex	(or np	tion stated	od in Section 119.07(3)(i), Florida Statutes. I further certify that the information
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 true 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 extrems.						

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