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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Plac	te of Business	Mailing Address					
950	SW 11TH PERRACE	950 SW 11	TH TEXENCE				
BACA	RATON FL	DACA DAM	\\(C	DO NOT WRITE	IN THIS SPA	ACE	
DUCA	•	BOCA RATO		3. Date Incorporated or Qualified			
	33456	·	33486	12/02/1993			
	Place of Business	2a. Mailing Address		4. FEI Number	`		pplied Far
Suite Apl	RIDU, FL	Suite, Apt. #, etc.		65-0462710			ot Applicable
22	SAME AS BUX #	30(to, Apr. #, 8to.		5. Certificate of Status Desired	X ;		Additional equired
City & State		City & State		6. Election Campaign Financing			May Be
23		28		Trust Fund Contribution			to Fees
Zip	Country	7 p	Country	8. This corporation owes or has pa			
24	25	29	30	Personal Property Tax due June			No No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Age	ent	
	FURICK RO	BERT					
	·		82 Street Add	dress (P.O. Box Number is Not Acceptable	le)		
	950 SW 111	M TERRICE	83				
	BOCA RATUN	C) 23486					
	BOSA ISKLON	, FL 33196	84 City		FI I	35 Zip	Code
11. Pursuani t	to the provisions of Sections 607,0502	and 607.1508, Florida Statut	es, the above-named cor	rporation submits this statement for the p	urpose of ch	anging it	s registered
	enistered agent, or both, in the State of	al Fracida, Euch changa was a	authorized by the corners	ation's board of directors. I hereby accep	t the appoint	ment as	registered
office or re	m familiar with and account the obliga	tions of Spection 607 0505. Fir	orida Statutes	• •			
office or re agent I a	m familiar with, and accept the obliga	tions of, Section 607 0505, Flo	orida Statutes.	, .			
office or re agent I a	m familiar with, and accept the obliga	tions of, Section 607 0505, Flo	orida Statutes. 1. Registered Agent signature requi		DATE		
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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 on an attachment with an address.

SIGNATURE:

402-6820

FILED

Mar 12 1998 8:00am

Secretary of State