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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Name
CALHOLIN & COMPA



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400009356 (4)

## FILED Feb 16 1998 8:00am Secretary of State

CALHO	UN & COMPANY, INC.								
Principal Place of Business Mailing Address						ı ibbistă i sia latis dinis abili anist anı	() BUILL UNITED I	1818 6 115 BL MAI	(# P)(  1881
2741 N.E. 57TH COURT 2741 N.E. 57TH COURT									
FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 3330						DO NOT WRITE	IN THIS ST	DACE	
						3. Date Incorporated or Qualified	IN THIS SI	ACE	
						01/28/1994			
2. Principal Place of Business 2a. Mailing Addr						4. FEI Number		IAc	plied For
21		26				65-0481141			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.					\$8.75	Additional
22		27				Certificate of Status Desired		Fee Re	quired
City & State	0	City & State			]	6. Election Campaign Financing	_	\$5.00	May Be
23						Trust Fund Contribution	<u> </u>	Added t	
Zip	Country Zip					8. This corporation owes or has pai	-		
24	25 9. Name and Address of Current	29 30	<u> </u>			Personal Property Tax due June 10. Name and Address of New Res			No
CA		. riogistored Agent	81	Name		IO. Hallie alle Neerbas et Hem ries	Jiatoreo A	Hour	
CALHOUN, PEGGY J 2741 N.E. 57TH COURT				L					
FORT LAUDERDALE FL 33308			82	Street	Addres	s (P.O. Box Number is Not Acceptab	ie)		
	THE CAUDENDACE TE GOODS		83		-				
								T T =0.00	
			84	City			FL	<b>65</b> Zip (	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the above	-named	corpora	ation submits this statement for the p		changing it	s registered
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.									registered
SIGNATURE	,								
SIGIVATORE	Stgnature, typed or printed name of registered ager	d and tile dapplicable (NOTE R	ng sterod Age	nt signature	required	when reinstaling)	DATE		
12.	OFFICERS AND		13.		1 <del>1 / /</del>	ADDITIONS/CHANGES TO OFFIC			
TITLE	D CALHOLIN DECCY I	☐ DELETE	1.1 TITLE		PTO	l e e e e e e e e e e e e e e e e e e e	Ľ	Change	☐ Addition
NAME	Calhoun, Peggy J 2741 N.E. 57th Court		1.2 NAME						1
STREET ADDRESS	FORT LAUDERDALE FL 33308	,	1.3 STREET ADDRESS						\ \
CITY-ST-ZIP TITLE	TOTT BRODETBALE TE 03300	DELETE	2.1 TITLE	CITY-ST-ZIP			<sub>-</sub>	Change	Addition
NAME /			2.2 NAME				_		
STREET ADDRESS	■ <sup></sup>		2.3 STREET	ADDRESS					
CITY-ST-ZIP			2 4 CITY-ST-ZIP		1				
TITLE		☐ DELETE	3 1 TITLE				Ţ	Change	☐ Addition
NAME			3 2 NAME						
STREET ADDRESS			3 3 STREET	ADDRESS					
CITY-ST-ZIP	34		3 4. CITY-S	T-ZIP					
TITLE	☐ DELETE 4.1		4.1 TITLE				Ĺ	Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	address					
CITY-ST-ZIP			4.4 CITY-S	T - ZIP	ļ			7.0	4.400
TITLE		☐ DETETE	5.1 TITLE		1		L	Change	☐ Addition
NAME			5 2 NAME						
STREET ADDRESS			5.3 STREET						
CITY-ST-ZIP		DELETE	5.4 CITY-S	1-21P			<del></del>	Change	Addition
TITLE		L' Direit	6.1 TITLE				L	TI CHENIA	
NAME			6.2 NAME	ADADEOC					
STREET ADDRESS			6.3 STREET						ľ
City-St-ZiP	certify that the information supplied wi	th this filing does not qualify for t	64 CITY-S he exemp		od in Se	ction 119.07(3)(i), Florida Statutes. I	further cert	tify that the	Information

4. 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 informatio indicated on this annual report or suppliemental 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 this public, or on an attachment with an address.

SIGNATURE: X

2-10-98

954 493-8958