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

1.	Corporation	SAILS, I	, , , , ,	00103	502 (5)							
Pri	Principal Place of Business Mailing Address										IND ISBN 1884	
2409 E. LAS OLAS BLVD P. O. BOX 2485												
FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33303-248						303-2485						
US				US	US				DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Qualified 01/31/1994			
2.	Principal P	lace of Busin	ness	2a. Maili	ing Address				4. FEI Number	— — -	pplied For	
21		A - 1 4 - 1 -			26				65-0467017		ot Applicable	
Ь,	Suite, Apt.	te, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	
22	City & State	& State			City & State						equired	
23	City & State	nty & State			28				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
	Zip		Country	Zip		Coul	ntrv		8. This corporation owes or has paid the curre			
24			25	29		30	,			–	No	
		9. Name	and Address of Curre		Agent	1001			10. Name and Address of New Registered A			
	HA	ROLD S. E	OFSHEVER				B1	Name				
	2455 E SUNRISE BLVD.							Street A	Address (P.O. Box Number is Not Acceptable)			
SUITE 917						Ì	82	שונספו או	NOUTESS (F.O. DOX NUMBER IS NOT ACCEPTABLE)			
FT. LAUDERDALE FL 33304						Ī	83					
						ļ	84	City	FI	85 Zip	Code	
	Pursuant office or reagent La	to the provis ogistered ag im familiar w	ions of Sections 607.050 pent, or both, in the State ith, and accept the oblig	02 and 607,15 of Florida. Su pations of, Sec	08, Florida Statu ich change was tion 607.0505, Fl	tes, the ab authorized lorida Stati	ove by ltes	the corpo	corporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoint	hanging in ntment as	ts registered registered	
		Signature, typod	or printed name of registered ag			TE: Registered	Age	nt signature re	required when reinstating) DATE			
12		DP	OFFICERS AN	ID DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AND I			
THT			V LMAALA		DELETE	1.1 T(T			, L	Change	☐ Addition	
NAI	l l		Y, VIVIAN A Las Olas BLVD.			1.2 NA						
ŀ	EET ADDRESS		IDERDALE FL					ADDRESS				
	Y-ST-ZIP	VPST	DERDALE FL		DELETE	1.4 CIT		(-ZIP		Change	Addition	
TITL			Y, RAYMOND L		C) perele	2.1 1(1		1	L	_ Change	Mudition	
NAF			LAS OLAS BLVD.			2.2 NA						
	LEET ADDRESS		DERDALE FL			•		ADDRESS				
TITL	r-ST-ZIP	11 510	OCHOREC I C		DELETE	2 4 Ci		1-219		Change	☐ Addition	
NAM					23 3210	3.2 NA		1	· · · · · · · · · · · · · · · · · · ·	onengo	C Addition	
	EET ADDRESS							ADDRESS				
	Y-ST-ZIP					3.4. Cf						
TITL					DELETE	4.1 TIT	~~~			Change	Addition	
NAM	AE					4. 2 NA	ME					
	EET ADDRESS					1		ADDRESS				
	Y-ST-ZIP					4.4 CIT		i i			!	
TITL					☐ DELETE	5.1 TiT				Change	Addition	
NAN	AE	ĺ				5.2 NA	ME	- 1				
STR	EET ADDRESS					5.3 ST	REET	ADDRESS				
	Y-ST-ZIP	l				5.4 CIT						
TITE					DELETE	6.1 TIT				Change	Addition	
NAN	AE					6.2 NA	ME	1				

14. Thereby 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 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 affact) ment with an address.

6.3 STREET ADDRESS

STREET ADDRESS

FILED

Mar 27 1998 8:00am

Secretary of State