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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra S. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000011970 (8)

FILED Apr 15 1998 8:00am Secretary of State

POST	mark Pi	LUS	, INC.									
Principal Place of Business Mailing Address										- T TOOKIRAK IND HATHI ENDIN BAHHI BAHHI BAHHI BAHHI HIBAK INDIN HAHI HABIH BAHI HABI		
1280 SOUTH POWERLINE RD. SUITE # 17					1280 SOUTH POWERLINE RD. SUITE # 17					DO NOT WRITE IN THIS SPACE		
POMPANO BEACH FL 33069 POMPANO BEACH FL 3						33069	,069			3. Date Incorporated or Qualified		
										02/14/1994		
2. Principal Place of Business 2e, Mailing Add						Address				4. FEI Number Applied For		
21										_65-0466910 Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.				· · ·	SR 75 Additional		
22					7					5. Certificate of Status Desired Fee Required		
City & State					City & State					6. Election Campaign Financing \$5.00 May Be		
23				28						Trust Fund Contribution Added to Fees		
Zip	Zip Count			<u></u>	, <u> </u>			Country		This corporation owes or has paid the current year Intangible		
24		25	29			30				Personal Property Tax due June 30. Yes No		
g. Name and Address of Currer				Kegis	agistered Agent			81 Name		10. Name and Address of New Registered Agent		
	IOSENTHA						"	Name	Ð			
816 E. CRYPRESS LANE									t Addre	Address (P.O. Box Number is Not Acceptable)		
POMPANO BEACH FL 33086							83	60				
								65				
							84	City	,	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpora office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									pration submits this statement for the purpose of changing its registered			
SIGNATURE												
	Signature, typed	1 or pri	ited name of registered agent					ent signatu	re required	d when reinstating) DATE		
12.			OFFICERS AND	DIREC	DELETE	13			, -	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition		
TIFLE	ר אינו אינו אינו אינו אינו אינו אינו אינו	A HTL	AL DOMAIN		C) office	1	TITLE		1	C crange C Acouton		
NAME							NAME					
STREET ADDRESS	1				E T			ADDRESS	, [
CITY-ST-ZIP TITLE	VP				DELETE	1.4 CITY 2.1 TITL		II-ZIP	+	Change Addition		
NAME		ROSENTHAL, SERENA			<u> </u>	2.2 NA				E CHECK		
STREET ADDRESS	1							ADDRESS		- e		
CITY-ST-ZIP	50155110 551611 51 6564				<u> </u>			2. 4 CITY-ST-ZIP				
TITLE	. 544	, u 14	TOTT I E GOODS		☐ DELETE		TITLE		 	Change Addition		
NAME						3.2	NAME			• -		
STREET ADDRESS								ADDRESS	:			
CITY - ST - ZIP							CITY - S					
TITLE			·		DELETE		TITLE			☐ Change ☐ Addition		
NAME	l					4.2	NAME			·		
STREET ADDRESS					4.3 ST		ADDRESS	3				
CITY-ST-ZIP						4.4	CITY-S	T- ZIP				
TITLE					☐ DELETE	5.1	TITLE			Change Addition		
NAME						5.2	NAME					
STREET ADDRESS						5.3	STAEET	ADDRESS	;			
CITY-ST-ZIP		- 14	·			5.4	CITY-S	T-ZIP				
TITLE					DELETE	6.1	TITLE			☐ Change ☐ Addition		
NAME						6.2	NAME					
STREET ADORESS						6.3	STREET	ADDRESS	;			
CITY-S1-2IP							6.4 CITY-ST-ZIP		<u> </u>	Section 119 07/3V(i) Florida Statutes I further certify that the information		
TA I DOLODY (certity that th	o inte	rmetion cuonicad with	a ince i	iuna acce not auguly le	V IDA A	vamn	TION CIG	uan in C	section 139 D7(3)(I) Florida Statutes, I further certify that the information, I		

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 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 chapted, or on an attachment with an address.

SIGNATURE:

Konno Los ENTINO

4/8/98

(954)971-7689