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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000012598 (6)

FILED Feb 18 1998 8:00am Secretary of State

YANKI	EE ENTERPRISES, INC.				
Principal Pla	ice of Business	Mailing Address		I LONG LANDER ATTO CARREST OF AND A CONTRACTION OF THE CONTRACT OF THE CO	1010 1/001 Otion Iniol 1914 (00)
2421 SW 127 AVENUE		2421 SW 127 AVENUE	€		
DAVIE FL 33325		DAVIE FL 33325		DO NOT WRITE IN THI	¢ ¢bvce
				3. Date Incorporated or Qualified	3 STAGE
				02/11/1994	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0467367	Not Applicable
Suite, Api	t. #, otc	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	ate	City & State		Election Campaign Financing	\$5,00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
	9, Name and Address of Curr	ner continues what	81 Name	IV. Harris and Address of Hew Hegistere	v nyont
ZANELLI, JOHN					
	421 SW 127 AVENUE		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
U	AVIE FL 33325		83		
			84 City	F	85 Zip Code
11 Pursuan	It to the provisions of Sections 607 (502 and 607 1508. Florida St.	alules, the above-named co	rporation submits this statement for the purpose	
office or	registered agent, or both, in the Sta	ite of Florida. Such change w	as authorized by the corpora	ation's board of directors. I hereby accept the a	ppointment as registered
	am familiar with, and accept the obl	igations of, Section 607.0505	o, Florida Statutes.		
SIGNATURE	Signatore, bysed or persion caree of a general r	accept and the discolariable ((NOTE Registered Agent signature reg	uired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	ZANELLI, JOHN		1.2 NAME		
STREET ADDRESS	1201 HOLLYWOOD BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33019		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME]		22 NAME		
STREET ADDRESS	5)		2 3 STREET ADDRESS	÷	·)
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	5]		3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP		1 00
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS	\$ 		4.3 STREET ADDRESS		\
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE	1	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		j
STREET ADDRESS	i		5.3 STREET ADDRESS		\
CITY-ST-ZIP	 	DELETE	5.4 CITY-\$1-ZIP		Change Addition
TITLE		ב ענוונ			LI CHANGE LI MOUREUR
NAME OXDERY LDODGE			6.2 NAME		
STREET ADDRESS	`		6.3 STREET ADDRESS		İ
CITY-ST-ZIP	certify that the information convoled	with this blood done not quali	6.4 CITY-ST-ZIP	p Section 119 07/3Yi) Florida Statutes I further	certify that the information

Indicated on this annual report or supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that the information indicated on this annual report or supplience later than the same legal effect as if made under eath; 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.

473-6285