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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400026929 (7) 1. Corporation Name

## FILED Mar 25 1998 8:00am Secretary of State

OLIVEF	r Grand	, IN	C.										
Principal Plac	e of Busines	5		М	lailing Address			_		- I COMPLEMENT AS UNICES MARKET MARKET MARKET MARKET WESTERN OF	BED BILLD 10	(118 118)	)
2101 WEST COMMERCIAL BOULEVARD SUITE 4100 FT. LAUDERDALE FL 33309 ST. LAUDERDALE FL 33309 ST. LAUDERDALE FL 33309 ST. LAUDERDALE FL 33309								D		DO NOT WRITE IN THIS	SPACE		
										3. Date Incorporated or Qualified 04/08/1994			
2. Principal Place of Business					2a. Mailing Address					4. FEI Number		Ap	plied For
21					26					65-0479857			t Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired	+		dditional quired
City & State					City & State					6. Election Campaign Financing	\$5	.00	May Be
23					28					Trust Fund Contribution			o Fees
Zip	Country			$\vdash$	¬ ՝ Ի <del></del>			ountry		8. This corporation owes or has paid the co		_	
24	25     29   9. Name and Address of Current Registered Ager					[30]				Personal Property Tax due June 30. X Yes No  10. Name and Address of New Registered Agent			
00				Hegis	itered Agent		81	Τ.	Name	10. Name and Address of New Registered	Agent		
	BERT S. F						"	] '	INCHIE				
2101 W. COMMERCIAL							82 Street Addre			ss (P.O. Box Number is Not Acceptable)			
SUITE 4100							83						
FT.LAUDERDALE FL 33309							"						
							84	ĺ	City	FI		Zip C	
11, Pursuant office or r agent. I a	to the provis registered ag im familiar wi	ions jent ith, a	of Sections 607.0502 or both, in the State o nd accept the obligat	and 6 I Florid ions o	07.1508, Florida <b>St</b> a da. Such change wa f, Section 607.0505,	above ed by stutes	a-n ∕th s.	named corpor he corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the ap	of chang pointmer	ing its nt as r	registered registered	
SIGNATURE	Signature, typed	or prin	nted name of registered agent	and title	if applicable (f	NOTE: Register	ed Age	ent :	signature required	when reinstating) DATE			
12.			OFFICERS AND	DIREC	13.	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	CTOR	S IN 12	
TITLE	DPST				☐ DELEŤE	1.1 1	ITLE				Cha	ange	Addition .
name						1.2 N							
STREET ADDRESS 2101 WEST COMMERCIAL BOU					ILEVARD SUITE 4100			AD	DRESS				
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TITLE					☐ DELETE	2.1 1	ITLE				Cha	nge	☐ Addition
NAME						2.21	AME		}				
STREET ADDRESS						2.3 9	TREET	AD	ORESS				
CITY-ST-ZIP						2.4	CITY-S	st-	ZIP				l
TITLE					DELETE	3.1 T	ITLE				Cha	ınge	Addition
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TITLE					DELETE	4.1 T	ITLE				Cha	nge	☐ Addition
NAME						4.2	NAME						j
STREET ADDRESS						4.3 9	TAEET	ΑD	IDRESS				j
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TITLE					DELETE	5.1 1	ITLE	_			Cha	nge	☐ Addition
NAME						5.2 h	AME						
STREET ADDRESS						5.3 \$	TREET	ADI	DRESS				-
CITY-ST-ZIP						5.4 0	ITY-S	<u> 1 - 2</u>	ZIP				
TITLE					DELETE	6.1 T	TLE				Cha	nge	Addition
1111AF									- 1				- 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 rejector 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 influctionant with an address.

6.3 STREET ADDRESS

3/18/9