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

DOCUMENT # P94000031690 (8)

JOHN DUFFY & ILA, INC.

FILED
May 08 1998 8:00am
Secretary of State

Principal Pla	ice of Business	Mailing Address			i		
14 OHO ROAD LAKE WORTH FL 33467		14 OHIO ROAD LAKE WORTH FL 33467					
		ERRE WORTH PL 33407		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					04/25/1994		
·	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
26				65-0485824	Not Applicab		
27		Suite, Apt. #, etc.	ito.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
3		28			Trust Fund Contribution	Added to Fees	
Zip	Country	7 (p	Country		8. This corporation owes or has paid the		
4	25		30		Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No	
	9. Name and Address of Curi	ent Hegistered Agent	81	Name	10. Name and Address Of New Hegiste	en võeur	
	EIERLEIN, VICKI		8'	HANTE			
14 OHIO ROAD LAKE WORTH FL 33467			82	Street Ac	Address (P.O. Box Number is Not Acceptable)		
. .	ANE HONIN FE 50407		83				
			84	City		85 Zip Code	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE ND DIRECTORS	Registered Agen	t signature re	Quired when reinstating) DA ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	DELETE	1.1 TITLE		D/P	Change Additi	
NAME	DUFFY, JOHN	-	1.2 NAME			, -	
STREET ADDRESS	AND ALTER PARK AREA ATTEMPT OF THE		1.3 STREET ADDRESS		2141 Woolbright RD. #203	# 203	
CITY-ST-ZIP	MER CALINATINA CHI MI AAALA		1.4 CITY - ST - ZIP		BOYNTON BEACH FL 3	3426	
TITLE	D	DELETE	2.1 TITLE		BOYNTON BEACH, FL 3:	Change Additi	
NAME	DUFFY, ILA		2.2 NAME				
STREET ADDRESS		REET, BOX 578	2.3 STREET A	DDRESS .	2141 Woolbright RA. #	103	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		2.4 CITY-ST-ZIP 3		2141 woodbright RD. # BOYNTON BURGA, FL 3	3426	
TITLE		DELETE	3.1 TITLE		p	Change Additi	
NAME			3.2 NAME				
STREET ADDRESS	s		3.3 STREET A	DDRESS			
CITY+ST-ZIP			3.4. CITY - S1	- ZIP			
FITLE		☐ DELETE	4.1 TITLE			Change Additi	
NAME			4. 2 NAME				
STREET ADDRESS	s		4.3 STREET A	UDDRESS .			
CITY-ST-ZIP			4.4 CITY - ST	- ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change Additi	
NAME	•	·	5.2 NAME				
STREET ADDRESS	s		5.3 STREET A	ODRESS			

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 supplimental 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 attachment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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DELETE

3/1/20

61/222-9119

Change

___ Addition

R2E034 (10/97)