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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** **FILED**

Feb 27 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

2/15/99

1998 DOCUMENT #

Principal Place of Business

4400 W. SAMPLE SUITE 228

SIGNATURE:

P94000031777 (3)

Mailing Address 4400 W. SAMPLE

SUITE 228

EBS REPORTING SERVICES, INC.

COCONUT CREEK FL 33073 COCONUT CREEK FL 33073 3. Date Incorporated or Qualified 04/27/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0137999 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip " Žip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name * BELLEZZA, PETER J 4250 N A1A Street Address (P.O. Box Number is Not Acceptable) **SUITE 506** 83 N HUTCHINSON ISLAND FL 34949 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE CEO 1.1 TITLE Change Addition TITLE BELLEZZA, VITO 1.2 NAME NAME 3701 TURTLE RUN BLVD. 1.3 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33067** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE FISCHER, HAROLD S NAME 2.2 NAME 3701 TURTLE RUN BLVD. 2.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33067 CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TITLE DANIELS, WILLIAM NAME 3.2 NAME 2088 AUGUSTA STREET ADDRESS 3.3 STREET ADDRESS WESTIN FL 33326 CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change ... Addition TITLE 41 TITLE SHERB, STEVE NAME 4. 2 NAME STREET ADDRESS 805 THIRD AVE. 4.3 STREET ADDRESS NEW YORK NY 10022 4.4 CITY - ST - 7IP CITY - ST- 7IP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 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 changed or or an attachment with an address.