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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARIMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000032122 (1) DOCUMENT # PS

FILED Apr 21 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 24405 SW 212TH AVE P O BOX 924101 HOMESTEAD FL 33031 HOMESTEAD FL 33032							
		U\$				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1994	
2. Principal P	Place of Business	2a. Mailing Address	i. Mailing Address			4, FEI Number Applied For 65-0483596 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	7ip 29	30 Coun			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
10	nt Registered Agent		81	Name	10. Name and Address of New Registered Agent		
	ISNER, STEVEN D NW 16TH ST					(DO Doublest Alexander)	
	MESTEAD FL 33030			82	Street Ad	ldress (P.O. Box Number is Not Acceptable)	
				83			
				84	City	B5 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							
12.	Signature, typed or protect name of registered ap- OFFICERS AN		OH Registere	d Age	nt signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	DELETE	1.17	 11.E		ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS IN 12	
NAME	KELLY, WILLIAM E	KELLY, WILLIAM E		AME			
STREET ADDRESS	895 NW 14TH AVE	1.3		1.3 STREET ADDRESS			
CITY-ST-ZIP	HOMESTEAD FL 33030			ITY-S	1 · ZIP	Change	
TITLE NAME			2.1 T			☐ Change ☐ Addition	
STREET ADORESS			22 NAME. 23 Street a		ADDRESS		
CITY-ST-ZIP			2. 4 C(TY-ST-7)P				
TITLE		DELETE	DELETÉ 3.1 TOT			Change Addition	
NAME			3.2 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. C		11 · 71P	Change Addition	
NAME		<u></u>	4.21				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			4.4 C	ITY-S	T-ZIP		
TITLE	DELETE 5.11		11.6		Change Addition		
NAME			5.2 N	AME			
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CHY+ST-ZIP		1- ZIP	Change Addition	
TITLE NAME		בן טוניונ	DELETE 6.1 TITLE			Li change Li Addition	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			64 CHY-SI-ZIP				
44 1 beselve		10 0 5 00 - 30 - 30 - 30 - 30 - 30 - 30 -	6 15		· • · · · · · · · · · · · · · · · · · ·	5-02	

indicated on this annual report or supplied with this iming does not quality for the operation stated in Section 119.07(3)(), Florida Statutes. Further certify that the informatic 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 frusted empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.