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

P94000034639 (2)

Principal Place of Business Mailing Address 11790 NW 27TH ST PLANTATION FL 33323 Mailing Address 11790 NW 27TH ST PLANTATION FL 33323								
						DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualified 05/09/1994		
	Place of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	Applied For	
21	<u> </u>	26				65-0488064	Not Applicable	
Suite, Apt		Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta		28	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Ζιρ	L	Country		8. This corporation owes or has paid th	e current year Intangible	
24	25 29 30 9. Name and Address of Current Registered Agent			10		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Cu LE, JEFFREY T	irrent Registered Age	<u>nt</u>	81	Name	10. Name and Address of New Regist	ered Agent	
11790 NW 27TH ST PLANTATION FL 33323				82 83		dress (P.O. Box Number is Not Acceptable)		
				84	City		FL 85 Zip Code	
11. Pursuant office or agent. I a	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	.0502 and 607.1508, F State of Florida. Such c obligations of, Section 6	lorida Statutes hange was au 607.0505, Flori	the above thorized by da Statute	e-named cor the corpora	rporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing its registered appointment as registered	
SIGNATURE								
45	Signature, typed or printed name of registere		(NOTE: F		nt signature requ		ATE	
12.	OFFICERS AND DIRECTORS DP DELETE			13. 1.1 TITLE	<u> </u>	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition	
NAME	COLE, JEFFREY T		1.2 NAME			Change Asomon		
STREET ADDRESS	AATAA AKAI AMTI AT							
	CITY-ST-ZIP PLANTATION FL 33323			1.3 STREET				
TITLE				1.4 CITY - S 2.1 TITLE	1-ZIP		Change Addition	
NAME				2.1 HILL 2.2 NAME	į		C crange C Vocation	
STREET ADDRESS	1		2 3 STREET	ADDRESS	;			
CITY-ST-ZIP	■ **			2.4 CITY-5				
TITLE			DELETE	3.1 717LE	91 - ER		Change Addition	
NAME		<u> </u>		3.2 NAME			C overse C required	
STREET ADDRESS				3.3 STREET	ADDRESS			

CITY-ST-ZIP 6.4 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 on an attachment with an address.

3.4. CITY - S1 - ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME

Change

Change

Change

Addition

Addition

Addition

FILED

Feb 02 1998 8:00am

Secretary of State