## 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 # P94000042217 (7)

RICK S. CULLEN, P.A.

Principal Place of Business Mailing Address							184 <b>8</b> 1810 H### 1488	HIIII (EE) HEE
980 NORTH FEDERAL HIGHWAY 980 NORTH FEDERAL HIGHWAY SUITE 206 SUITE 206 BOCA RATON FL 33432 BOCA RATON FL 33432			HWAY			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
2 Principal P	lace of Rusiness	2a. Mailing Address				06/07/1994 4. FEI Number		Assettant For
2. Principal Place of Business 2a. Mailing Address 21							-	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						59-2729980	60.75	5 Additional
22		27				Fee Required		
City & State	8	City & State	¬ ', '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip			Count	A		8. This corporation owes or has paid th		
24	25 29 30		30	· · · · · · · · · · · · · · · · · · ·		☐ No		
Name and Address of Current Registered Agent						10. Name and Address of New Regist	ered Agent	
CUI	LLEN, RICK S ESQ.		8	1 Nan	те			
980		8:	82 Street Address (P.O. Bo		ss (P.O. Box Number is Not Acceptable)		·	
	TE 206 CA RATON FL 33432-2111		8:	3				
	O/ 11/11/01/12 00/02 21/1		84	4 City			- 85 Zij	p Code
							FL	•
l office or re	to the provisions of Sections 607.0: egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was a	uthorized t	ov the c	ed corpor orporation	ration submits this statement for the purpon's board of directors. I hereby accept the	ose of changing e appointment a	its registered as registered
SIGNATURE								
				jent signa	ure required		DATE	ODC 181 40
TITLE	D OFFICERS A	DELETE DELETE	13. 1.1 TITLE		$\overline{}$	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTO	
NAME				1.2 NAME			Wange	,
STREET ADDRESS 980 N. FEDERAL HWY., STE. 206				1.3 STREET ADDRESS				
CITY-ST-ZIP	DOOL DITOU SI		1.4 CITY-\$T-ZIP		٦			
TITLE			2,1 TITLE			***************************************	Change	e Addition
NAME			· ·	2,2 NAME			_ 3	
STREET ADDRESS				2.3 STREET ADDRESS				
CITY-ST-ZIP	1		2. 4 CITY		1			
TITLE			3.1 TITLE				☐ Change	Addition
NAME	3.3		3.2 NAME	3.2 NAME				
STREET ADDRESS	3.6		3.3 STREE	3.3 STREET ADDRESS				
CITY-ST-ZIP	3.4		3.4, CITY	-ST-ZIP				
TITLE	☐ DELETE 4.1		4.1 TITLE				Change	Addition
NAME			4. 2 NAM	Ė	·			
STREET ADDRESS			4.3 STREE	T ADDRES	s			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		DELETE	. 5,1 TITLE				Change	Addition
NAME			5.2 NAME					i
STREET ADDRESS			5.3 STREE	T ADDRES	s			
CITY-ST-ZIP			5.4 CITY-		$\bot$			
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6,3 STREE	T ADDRES	3	•		
CITY-ST-ZIP		CALL MAY FIRM A CONTRACT OF THE CONTRACT OF TH	6.4 CITY-		1	nation 110 07/2\/i) Elevido Statutos I fueth		

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 eath; that I am an officer or director of the corporation or the receiver of trustee employered 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.

SIGNATURE:

E TIERIEUS P

Jan. 15, 1998 861-392-8780

**FILED** 

Jan 23 1998 8:00am

Secretary of State

CR2E034 (10/97