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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMEN OF STATE

Sandra B. Moham

Secretary of Site DIVISION OF CORPORATIONS

DOCUMENT # P94000046532 (5)

ANDREW D. COHEN, INC.

FILED Apr 23 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 4191 NW 110TH AVENUE 4191 NW 110TH AVENUE **CORAL SPRINGS FL 33065** CORAL SPRINGS FL 33065 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/13/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-1505908 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired CORAL Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip 33065 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent COHEN, ANDREW 81 4191 NW 110TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL SPRINGS FL 33065 83 84 City 85 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 Satutes. **SIGNATURE** Signature: typed or presed hance of registered agent and title it applicable. (NOTL: Regist and Agent signature required when reinstating) OFFICERS AND DIRECTORS CR2E034 (10/97) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 horce Change Addition NAME GAGNON, CRAIG 1 NAME 8111 N.E. 4TH AVENUE STREET ADDRESS 1. STREET ADDRESS 33065 FT. LAUDERDALE FL CITY-ST-ZIP 1. CITY-S1-ZIP TITLE DELETE 2. ITLE Change Addition NAME 2.4NAME STREET ADDRESS 2.5 STREET ADDRESS CITY - ST - ZIP TITLE DELETE MITLE Change Addition NAME STREET ADDRESS TREE1 ADDRESS CITY-ST-ZIP ITY-ST-ZIP TITLE DELETE Change Addition TLE IAME STREET ADDRESS TREET ADDRESS CITY-ST-ZIP ITY - ST - ZIP TITLE DELETE Change Addition TLE NAME MF STREET ADDRESS REET ADDRESS CITY-ST-ZIP TY - \$1 - ZIP TITLE DELETE Change Addition NAME STREET ADDRESS RÉET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the indicated on this annual report or supplemental annual report is true and accurate officer or director of the corporation or the receiver or trustee empowered be executed block 12 or Block 13 if changed, or on an attrichment with an accress

SIGNATURE:

mption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information I that my signature shall have the same legal effect as if made under oath; that I am an his report as required by Chapter 607, Florida Statutes; and that my name appears in