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

P94000050506 (2)

FROM CORPORATION

ENOAL	CONFORMION								
Principal Plac	e of Business	Mailm	g Address				- I SABILIANS AIN INSER BINIT AND ILL	11 MILLS MEIBL MINT M	/B III B B III 1881
58 CITRUS P BOYNTON BE	ark lane Each fl 33436	58 CITRUS PARK LANE BOYNTON BEACH FL 33436							
US US							DO NOT WRITE IN TO	HIS SPACE	
							3. Date Incorporated or Qualified		
9 Principal D	lace of Business	l an M	ailing Address				07/07/1994 4. FEI Number		Annied For
21 - Tincipal F	lace of business	26	ming Address				65-0503475		Applied For Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.							Additional
22		27					5. Certificate of Status Desired		Required
City & Stat	e		y & State	-			6. Election Campaign Financing	\$5.0	O May Be
23		28					Trust Fund Contribution		d to Fees
Zıp			'		ountry		8. This corporation owes or has paid the current year Intangible		ntangible
24		29		30			Personal Property Tax due June 30.		□ No
	9. Name and Address of Curre		d Agent	_	81		10. Name and Address of New Registe	red Agent	
	PRPORATION SERVICE COMPAN	(Y			81	Name			
	01 HAYS STREET		82 Stree			Street Addre	dress (P.O. Box Number is Not Acceptable)		
I A	LLAHASSEE FL 32301				83		· · · · · · · · · · · · · · · · · · ·		
					84	City		FL 85 Zir	p Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.	1508, Florida Statu	tes, the	above	e-named corp	oration submits this statement for the purpo-	se of changing	its registered
office or r	registered agent, or both, in the State	e of Florida. Se	Such change was action 607 0505, FI	authoriz orida St	ed by	the corporati	on's board of directors. I hereby accept the	appointment a	ıs registered
SIGNATURE	are decept the seng	Jacion 15 Or, Oc	0.000,11	0.100.0.	LIGIOL	·.			
SIGNATURE	Stgriature typed or printed name of registered ag			II. Registe	red Age	ant signature require	ed when reinstating) DA	(TE	
12.	OFFICERS AN	ID DIRECTO		13			ADDITIONS/CHANGES TO OFFICERS		
TITLE	D		☐ DELETE		TITLE			Change	e
NAME	CLARKE, ERROL				NAME				
STREET ADDRESS	58 CITRUS PARK LANE					ADDRESS			
City - S1 - ZiP	BOYNTON BEACH FL		☐ DELETE		CITY-S	T- ZIP		☐ Change	Addition
TITLE	_		□ Decent		TITLE			LI Change	Addition
NAME	CLARKE, VIVIENNE A 58 CITRUS PARK LANE				NAME				
STREET ADDRESS	BOYNTON BEACH FL					ADORESS			
CITY-ST-ZIP TITLE	BOTHTON BEACHTE		DELETE		CITY-S	S1-ZIP		Change	Addition
NAME			Section		NAME				
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP					CITY-S				i
TITLE			DELETE	_	TITLE			Change	Addition
NAME				4.2	NAME			·	
STREET ADDRESS				4.3	STREET	ADDRESS			
CITY-ST-ZIP				4.4	CITY-S	T-ZIP			
TITLE			DELETE	5.1	TITLE			☐ Change	Addition
NAME				5.2	NAME				
STREET ADDRESS				53	STREET	ADORESS			
CITY-ST-ZIP		<u> </u>		54	CITY-S	T-ZIP			
TITLE			☐ DELETE	6.1	TITLE			Change	Addition
NAME				6.2	NAME				
STREET ADDRESS				6.3	STREET	ADDRESS			
CITY - S1 - ZIP				6.4	CITY-S	T-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 attemption with an address.

SIGNATURE:

FILED

Apr 16 1998 8:00am

Secretary of State

561-7361210