## 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 #
1. Corporation Name P94000057986 (9)

PUDER DEVELOPMENT, INC.

**FILED** Apr 29 1998 8:00am Secretary of State



					11
Principal Plac	ce of Business	Mailing Address			11
7200 W. CAMINO REAL		7200 W. CAMINO REAL			
SUITE 104 SUITE 104  BOCA RATON FL 33433 BOCA RATON FL			DO NOT WRITE IN THIS SPACE		
BOCA RATON FL 33433 BOCA RATON FL 33433				3. Date incorporated or Qualified	
				08/05/1994	
	Place of Business	2a. Mailing Address		4. FEI Number Applied	For
21 797	8 Laina Lane	26 70 M. Pude	er	65-0520369 Not Appl	licable
Suite, Apt.	.#, etc. Da	Suite, Apt. #, etc.	lava n	5. Certificate of Status Desired  \$8.75 Addition	
22 #	2	27 8419 Twin	lake Dr.	Fee Required	
<b>⊢</b> `~`	ton Beach, FL	28 Boca Raton	, FL	6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fee	
Zip_ /	Country	Zip	Country	8. This corporation owes or has paid the current year intangible	le
24 334			10 USA	Personal Property Tax due June 30.  Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  DIDES MICHAEL C 81 Name					
PUDEN, MICHAEL S					}
<b>.</b>	00 WE CAMINO REAL JITE 104		82 Street	Address (P.O. Box Number is Not Acceptable)	
	CA FIATON AL 33433		83 9 4	119 TOTAL PARE OF	
	tou throw it goves		24 00		
	•		84 City	za Raton FL 185 Zip Code 33496	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named	corporation submits this statement for the purpose of changing its regis	stered
agent. I a	am familiar with, and according the soligat	ir Horida. Such change was au ions of, Section 607.0505, Flori	itnorized by the corp ida Statutes.	corporation submits this statement for the purpose of changing its registoration's board of directors. I hereby accept the appointment as register	ered
SIGNATURE	///	·		4/28/92	
12.	Signature, types or printed hance of registered agent OFFICERS AND		Registered Agent signature		
TITLE	I D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	Addition
NAME	PUDER, MICHAEL S		1.2 NAME	Change Lin	1
STREET ADDRESS	7200 W. CAMINO REAL, SUITE	104	1.3 STREET ADDRESS	8419 Twin Lake Dr.	
CITY-ST-ZIP	BOCA\RATON FL 33433		1.4 CITY-ST-ZIP	Boxa Roton, FL 33496	
TITLE		☐ DELETE	2.1 TITLE		ddition
NAME			2.2 NAME	Gan Rosen	
STREET ADDRESS			2.3 STREET ADDRESS	8419 Tuin lake Or	
CITY-ST-ZIP TITLE		DCLETC	2. 4 CITY-ST-ZiP	Boca Raton, FL 33496	
NAME		☐ DELETE	3.1 TITLE	Change A	Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE	Change A	ddition
NAME		- <del></del>	4. 2 NAME	Online in	
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE	Cipenge	ddition
NAME			5.2 NAME	X1 1//_	
STREET ADDRESS			5.3 STREET ADDRESS	<h $U$ $>9$	
CITY-ST-ZIP			5.4 City - ST - ZIP	$\mathcal{O}(\mathcal{O})$	
TITLE		DELETE	6.1 TITLE 👾 🖫 .	400002505524hange DAI -04/30/9801004028 ***150.00	ddition
NAME			6.2 NAME	~U4/3U/3G~~U1UU4~~UC6 ***1C0	
STREET ADDRESS			6.3 STREET ADDRESS	- 本本本1つい。60	
14. I bereby c	certify that the information supplied with	this filing does not qualify for	6.4 CITY-9T-7IP	d in Section 110 07(2)(i) Florida Statutos I further partifu that the information	ntine

indicated on this annual report or supplied with this ning does not quality 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 angual 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.