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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400060607 (6)

FILED Mar 06 1998 8:00am Secretary of State

ANO EN	NTERPRISES, INC.				
Principal Place	a of Business	Mailing Address		I COGNEDSKI DING NOTHS OFFICE OCCUR AND	Edilê Aitsı onsin bilil Balıl sonı tadı
3009 NW 28TH TERR P.O. BOX 4294 BOCA RATON FL 33434 DEERFIELD BEACH FL 33 US		3442	DO NOT WRITE IN THIS SPACE		
l				3. Date incorporated or Qualified	
				08/15/1994	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0509062	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	0	City & State			
	б	—-¬		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 _{(P}	Country	8. This corporation owes or has paid	
24	25	29	30	Personal Property Tax due June 30	
	9. Name and Address of Curr		1271	10. Name and Address of New Regis	
06	BORN, AMY	· · · · · · · · · · · · · · · · ·	81 Name		,
	20 N.W. 55TH BLVD.		82 Street Add	dress (P.O. Box Number is Not Acceptable	<u>, </u>
	CONUT CREEK FL 33703		62 STIBBLE ACIC	iress (P.O. Box Number is Not Acceptable	'
"	OONOT ONLER TE 00700		83		
			1		Jeel 7: 0:4:
			64 City		FL 85 Zip Code
44 Duramont	to the provisions of Sections 607.0	502 and 607 1508. Florida Statute	es, the above-named con	poration submits this statement for the our	pose of changing its registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a ligations of, Section 607.0505, Flo	authorized by the corpora orida Statutes.	ation's board of directors. I hereby accept	the appointment as registered
	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a ligations of, Section 607,0505, Flo	authorized by the corpora prida Statutes.	poration submits this statement for the pur tion's board of directors. I hereby accept to	the appointment as registered
SIGNATURE	Signature, type dior printed name of registered a	TON) oktastiqasti util bratinoga	authorized by the corpora orida Statutes. F Registered Agent signature requi	ired when re-instating)	DATE
SIGNATURE	Signature, type'd or profind name of registered a	ngent and little it applicable (NOTE	Registered Agent signature requi		DATE RS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, pared or praised name of regeneral a OFFICERS A	TON) oktastiqasti util bratinoga	13.	ired when re-instating)	DATE
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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 of 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 plan attachment with an address.

SIGNATURE:

(SW) 487-1907