## 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

## FILED Jan 26 1998 8:00am Secretary of State

DOCU 1. Corporation ETAGE		# <b>P94</b> 00	000645	05 (8)							1 <b>1131</b> 1 1101 11	
Principal Place of Business Mailing Address								$\dashv$	[			
199 N.W. 28TH ST., SUITE 7 199 N.W. 28TH ST., SUIT BOCA RATON FL 33431 BOCA RATON FL 33431						E 7			DO NOT IND	(TC IN THE	22405	
								-	DO NOT WR  3. Date Incorporated or Qualifie		SPACE	
								٦	08/29/1994	u		
2. Principal F	Place of Busin	ness	2a. Mailing	2a. Mailing Address				4	4. FEI Number Applied For			
21			26						65-0517289			ot Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				5	. Certificate of Status Desired			Additional
City & Stat	<u> </u>		27	City & State								equired
23	-	<u> </u>	28	28				6	<ul> <li>Election Campaign Financing Trust Fund Contribution</li> </ul>			May Be to Fees
Zip	·		Zip	— · ·		Country		8	. This corporation owes or has			
24	9. Name	and Address of Cur	29 rent Registered A	30				10	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
- DIA	MOND, KE		•			61	Name	- 10	, Hame and Address of Hew	riogistereo /	- Agorn	
199	9 N.W. 28TI	H ST., SUITE 7				82	Street A	ddress (	P.O. Box Number is Not Accep	table)		
80	CA RATON	FL 33431										
						83						
						84	City	FLI		1 7	Code	
11. Pursuant office or r agent. La	to the provis egistered ag m familiar wi	ions of <b>Se</b> ctions 607.0 ent, or <b>b</b> oth, in the Sta th, and <b>a</b> ccept the ob	502 and 607.1508 ate of Florida. Such ligations of, Sectio	, Florida Statu n change was n 607.0505, F	tes, the ab authorized lorida Stati	ove by	named c	corporation's	on submits this statement for the board of directors. I hereby acc	e purpose of cept the app	changing il pintment as	ts registered registered
SIGNATURE				·								
12.	Signature, lyped	or printed name of registrico	agent and title if applicab AND DIRECTORS	le (NO	E: Registered	Agen	l signature re			DATE		1
TITLE	D	OFFICENS A	IND DIRECTORS	DELETE	13.	F	Τ.		ADDITIONS/CHANGES TO OF	-ICERS AND	DIRECTOR  Change	RS IN 12
NAME	_	D, KEVIN		<del>-</del>			1.2 NAME					70011011
STREET ADDRESS		. ATLANTIC BLVD.	#302				1.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL	SPRINGS FL 33071		1.			- ZIP					
TITLE				DELETE	2.1 T(T)	E					Change	Addition C
NAME												
STREET ADDRESS					2.3 STR	EET A	DDRESS					
CITY-ST-ZIP TITLE				DELETE	2. 4 CIT		-ZIP		<u> </u>			T . 7755
NAME				L DELETE	3.1 TITL						Change	☐ Addition
STREET ADDRESS					3 2 NAM		DDRESS					
CITY-ST-ZIP					3.4. GIT							
TITLE				DELETE	4.1 1110		-				Change	Addition
NAME					4. 2 NAI	ME						_
STREET ADDRESS					4.3 STR	EET A	DDRESS					
CITY-ST-ZIP					4.4 City	/-ST-	ZIP		200.00			
TITLE				DELETE	5.1 TITL		[				Change	Addition
NAME					5.2 NAN							
STREET ADDRESS					5 3 STRI		I					
CITY-ST-ZIP TITLE				DELETE	5.4 CITY		ZIP				Charles	A = 250
NAME			'	OLLCIE	6.1 TIJL 6.2 NAM					1	Change	☐ Addition
STREET ADDRESS					6.3 STRI		DDRESS					
CITY-ST-ZIP					6.4 CITY		i					
	ertify that the	information supplied	with this filing doe	s not qualify fo	or the exen	nptic	on stated	in Section	on 119.07(3)(i), Florida Statutes.	I further cer	tify that the	information

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 trostee 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.

OIONATURE.

in Chairman Promy No

1-15-00

501-202-2021