FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000065051 (2)

FALK BUILDING, INC.

FILED May 05 1998 8:00am Secretary of State



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Principal Place of Business	Mailing Address			
901 E. ATLANTIC BLVD.	901 E. ATLANTIC BLVD.			
POMPANO BEACH FL 33080	POMPANO BEACH FL 330)8U	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
			08/29/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0517088	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27	 		Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
¬ '	ê '	30	8. This corporation owes or has paid the Personal Property Tax due June 30.	Current year Intangible Yes No
	29	301	10. Name and Address of New Register	
FALK, RONALD		81 Name		
901 E. ATLANTIC BLVD.				
POMPANO BEACH FL 3306	80	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
FUMERING DEACH FL 3300	90	83		
		84 City	1	85 Zip Code
11 Pursuant to the provisions of Sections	607 0502 and 607 1508 Florida Statute	s the above-named corr	poration submits this statement for the purpos	
office or registered agent, or both, in	the Stale of Florida. Such change was at the obligations of, Section 607.0505, Flor	uthorized by the corporal	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE Signature, typed or printed names of in	ANOTE A CONTRACT OF THE A STATE OF THE ANOTE OF THE ANOTHER OF THE A	Registered Agent signature requi	red when reinstating) OA	i
	CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE D	DELETE	1.1 TOTLE		Change Addition
HAME FALK, RONALD		1.2 NAME		
STREET ADDRESS 901 E. ATLANTIC BLY	VD.	1.3 STREET ADDRESS		
CITY-ST-ZIP POMPANO BEACH F	L	1.4 CITY - ST - ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY-ST-ZIP		2 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		52 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		(
City-St-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP		
14. I hereby certify that the information su	applied with this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the information

officer or director of the corporation or the roceiver 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 appears in

4-24-98 781-250.