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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000067191 (4)

CYNTHIA ENTERPRISES, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					T TO DESCRIPTION OF THE POSITION OF THE POSITI	V 81174 FQ VQ V 41 319	I O I BILLING		
547 E SAM POMPANO	PLE RD BEACH FL 33064	547 E SAMPLE RD POMPANO BEACH FL	547 E SAMPLE RD POMPANO BEACH FL 33084			DO NOT WRITE IN THI	S SPACE		
i						3. Date Incorporated or Qualified			
						09/07/1994			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	A	oplied For	
21		26				65-0518663	N	ot Applicable	
Suite, Apt.	#, etc.	Suife, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired	
City & State	6	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	Country		8. This corporation owes or has paid the o	urrent year In	tangible	
24	25	29	30			Personal Property Tax due June 30. Yes No			
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
P	EEBLES, CYNTHIA			81	Name				
547 E SÁMPLE RD POMPANO BEACH FL 33064				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
r	UMPANU DEAUN FL 33004			83					
				84	City	F	85 Zip	Code	
11 Pursuant	to the provisions of Sections 607 05	502 and 607 1508 Florida State	ites, the a	DOVE	-named corpo	oration submits this statement for the purpose		ts registered	
office or r	egistered agent, or both, in the Sta	te of Florida. Such change was	authorize	d by	the corporation	on's board of directors. I hereby accept the a	ppointment as	registered	
ageni. i a	m familiar with, and accept the obli	igations of, Section 607:0505, P	ionua sta	เยช	•				
SIGNATURE	Signature, typod or printed name of registered a	apert and title if applicable INC	TE: Begistere	d Ape	ni signalura require	d when reinstating) DATE			
12.	····	ND DIRECTORS	13.	·		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12	
TITLE	D	DELETE	1.1 TE	TLE			Change	Addition	
NAME	PEEBLES, CYNTHIA		1.2 N	AME					
STREET ADORESS			1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	MARGATE FL 33063			TY-\$1	l				
TITLE	D	DELETE	2.1 TI			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change	Addition	
NAME	PEEBLES, CHARLES		2.2 N						
STREET ADDRESS	7326 PINEWALK DR S		2.3 STREE		ADDRESS				
CITY-ST-ZIP	transfer of the second			2.4 CITY-ST-ZIP				į	
TITLE			3.1 Ti				Change	Addition	
NAME		_	3.2 N						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP					T-ZIP			ł	
TITLE		DELETE	4.1 Ti		1 411		Change	Addition	
NAME			4. 2 N						
STREET ADORESS					ADDRESS			l	
			4.3 S 4.4 C		i				
CITY-ST-ZIP		DELETE			1-21P		Change	Addition	
TITLE			5.1 Ti				مار منظم		
NAME CIRCL ADDRESS			5.2 Ni		ADDOCCO			l	
STREET ADDRESS			- 6		ADDRESS				
CITY-ST-ZIP			5.4 C		I - ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
TITLE		☐ DELETE	6.1 TI				L. Grange	AGUILIUR	
NAME			6.2 N						
				6.3 STREET ADDRESS				1	
CITY - ST - ZIP			6.4 C	TY-S	T-ZIP			i	

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 attachment with an address.

4/28/98

954-945-1234