## 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 # P94000075245 (8)

## **FILED** Feb 20 1998 8:00am Secretary of State

THE F	ISCHERMARK, IN	C.								
Principal Place of Business Mailing Address								R 1884		
2373 CLUBHOUSE DR 2373 CLUBHOUSE DR WEST PALM BEACH FL 33409 WEST PALM BEACH FL 3340										
							DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified			
							10/12/1994			
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied			
21			26					plicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additi			
City & State			City & State			<del></del>	Fee Require			
23			28				6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe			
Zip Country			Zip Country				This corporation owes or has paid the current year Intangible			
24	25	·	29	30	<b>y</b>		Personal Property Tax due June 30.  Yes  No			
9. Name and Address of Curren							10. Name and Address of New Registered Agent			
FISCHER, TRISHA W						Name	3 , 3			
2373 CLUBHOUSE DR					82	Ctrost ^	ddress (P.O. Box Number is Not Acceptable)			
	ST PALM BEACH FI	33409			62	Street A	ddress (P.O. Box Number is Not Acceptable)			
TIEST TAEM DEADITIE 30400					83					
						- A-1:				
					84	City	FL 85 Zip Code	,		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the al						named c		gistered		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
i	Translation Translation	out the obligation	0 011 00011011 007.00001	ionad old	idioo	•				
SIGNATURE	Signature, typed or printed name	e of registered agent and	litte if applicable. (NO	TE: Aegistere	d Agei	nl signature re	equired when reinslating) DATE	[		
12.		FFICERS AND DI		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN			
TITLE	D		DELETE	1.1 T	TLE		L. Change .	Addition		
NAME			1.2 N		1.2 NAME			1		
STREET ADDRESS % 2373 CLUBHOUSE DR					1.3 STREET ADDRESS			ľ		
CITY-ST-ZIP	WEST PALM BEA	CH FL 33409		_	ITY-SI	r-ZIP				
TITLE	0	•	☐ DELETE	2.1 TF	TLE		☐ Change	Addition (		
NAME	FISCHER, TRISHA			2.2 N/		-		1		
Street Address					TREET	ADDRESS				
CITY-ST-ZIP WEST PALM BEACH FL 3340			Distre	2.4 CITY		T-ZIP	01	4 4 4 1 1 1		
TITLE			☐ DELETE	3.1 TI		- 1	LJ Change	Addition		
NAME				3.2 N/				1		
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NAME CTREET + DROSCO				4.2 N		10000000				
STREET ADDRESS						ADDRESS				
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NAME			C DELETE	and the second			C cuange C	PROBLEM		
				5.2 N/		ADDRESS		İ		
STREET ADDRESS								İ		
CITY-ST-ZIP TITLE			DELETE	5.4 CI 6.1 Tri	TY-ST	- 2117	Change	Addition		
NAME			DELETE	6.2 NA			C. Grienijo 🔲	- 100-51011		
STREET ADDRESS						*UDBESS				
					6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					
CITY-ST-ZIP	·		477	0.4 CI	11-51	- cir				

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.

2/11.198