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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 23 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400077676 (2)

JORDAN & PRICE CREDIT SERVICES CO. INC.

Principal Place of Business Mailing Address								,	# 1860\(DD: 510 SD)\( D10\(1 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1) 00\(1)
7100 W. CAM	INO REAL			7100 W. CAMINO REAL					
215				215					DO NOT WRITE IN THIS SPACE
BOCA RATON	FL 33433		BOCA RATON FL 33433 US					3. Date Incorporated or Qualified	
00									10/20/1994
2. Principal Place of Business				2a. Mailing Address					4. FEI Number Applied For
21				26					65-0550593 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					\$8.75 Additional
22				27					Fee Required
City & State				City & State					Election Campaign Financing \$5.00 May Be
23			26	28					Trust Fund Contribution
<b>—</b>	Zip Country			Zip Country			ntry		8. This corporation owes or has paid the current year Intangible
24	4 25		1 Current Boo					Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent 81 Name								(0), regula and vocases of their treatment vigent	
	IST, RICHA								
7100 W. CAMINO REAL							82 Street Address (P.O. Box Number is Not Acceptable)		
STE. 215							83		
BOCA RATON FL 33433									
							84	City	FL 85 Zip Code
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.									
SIGNATURE									
	Signature, lyped	or printed name of rec			(NOT		Age	nt signature requ	ired when reinstating) DATE
12.	- BDO*	OFFIC	ERS AND DIR		DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE	DPST	NOLLADD		L	T) Deceate	1.1 111		1	Change (2 / Notifier)
NAME	TIAN W GALLED DELL ATE				1.2 N			4 D D D C C C	f
BOOK BATOM CL								ADDRESS	
CITY-ST-ZIP TITLE	F-ZIP BOCA RATON FL				DELETE 2.171			1-214	Change Addition
[	[			2.2 N					
NAME								ADDRESS	
STREET ADDRESS								1	
CITY-ST-ZIP TITLE				Г	DELETE 3.1 TI			ST-ZIP	Change Addition
NAME				•		3.2 NA			
STREET ADDRESS								ADDRESS	
						3.4. CF		· · · · · · · · · · · · · · · · · · ·	
TITLE	CITY-ST-ZIP				DELETE	4.1 TiT			Change Addition
NAME				. 4.2					
STREET ADDRESS								ADDRESS	į
CITY-ST-ZIP					-	4.4 CIT			
TITLE					DELETE	5.1 TiT			Change Addition
NAME						5.2 NA	ME		
STREET ADDRESS						5.3 ST	REET	ADDRESS	
CITY-ST-ZIP						5.4 Qf1	Y-5	T-ZIP	
TITLE					DELETE	6.1 TIT			Change Addition
NAME						6.2 NA	ME		
STREET ADDRESS						6.3 ST	REET	ADDRESS	
CITY-ST-ZIP						6.4 Cf1			
14. hereby c	ertify that th	e information su	pplied with thi	s filing does	not qualify f				n Section 119.07(3)(i), Florida Statutes. I further certify that the information ure shall have the same legal effect as if made under oath; that I am an quired by Chapter 607, Florida Statutes; and that my name appears in
indicated officer or i	on this annu director of th	a report of supple corporation of	piemental ann r the receiver-	uai report is <del>u trustoa e</del> r	nue ano aco	execute t	i una his i	ai iny signati report as rec	quired by Chapter 607, Florida Statutes; and that my name appears in