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 Apr 28 1998 8:00am Secretary of State

DOCUI	MENT # P94000	084627 (6)		
· ·	REALTY, INC.	` '		
THOAT	HEALTS INC.			FARRITARI ALA CALLI BIRLI ARINI BORNI ARINI BORNI BORNI BOLLI ALGUA ALGUA ALGUA ALGUA LIBUL ALGU ALGU
Principal Plac	e of Business	Mailing Address		1 COOLSON TO 1811 8:011 00111 00114 00114 00114 00114 00114 01110 11811 1001
	CENTER CIRCLE	5100 TOWNE CENTER CIR	CLE	
SUITE 510 BOCA RATON	J EL 22496	SUITE 510 BOCA RATON FL 33486		DO NOT WRITE IN THIS SPACE
DOOR IIIION	112 99400	DOOR IMTOINTE WHO		3. Date Incorporated or Qualified
				11/14/1994
2. Principal P	W Newport Central	2a. Mailing Address 26 / S AM	e	4. FEI Number Applied For
21 (1 6 6 Apt.		26 Suite, Apt. #, etc.		65-0583988 Not Applicable \$8.75 Additional
22 #114		27		5. Certificate of Status Desired Fee Required
City & Stat	Gold Brook CI	City & State		6. Election Campaign Financing \$5.00 May Be
		28	Country	Trust Fund Contribution L.J Added to Fees
Zip 24 3344.			Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Current R	egistered Agent		10. Name and Address of New Registered Agent
	BENSTEIN, STEVEN A		81 Name	James Vouna_
5100 TOWNE CENTER CIRCLE			82 Street	Address (P.O. Box Number is Not Acceptable)
SUITE 610			83	166 W. Newport Center DY
80	CA RATON FL 33486			Duite 114
			84 City T	Dechreld Beach 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				
office or registered agent, or both, in the State of Honda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE Jones & Your 4/8/98				
12.	Start dire, typed or printed matter of printed as OFFICERS AND D	<u> </u>	Registered Agent signature 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DEFE	1 1 TITLE	PD Change Addition
NAME	RUBENSTEIN, STEVEN R) 3	1.2 NAME	Lamberton
STREET ADDRESS	- 5100 TOWNE CENTER CIRCLE,	SUITE 510	1.3 STREET ADDRESS	1166 W Dewbort Center Dr # 119
CITY-ST-ZIP	BOCA RATON FL 33486	ر	1.4 CITY - S1 - ZIP	Deetheld Beach H 334/2
TITLE	VTD	☐ DELETE	2.1 TIFLE	Change Addition
NAME	LITT, SHARON M		2.2 NAME	
STREET ADDRESS	6200 COURTNEY CAMPBELL CS	SWY, SUITE 300	23 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33607	DELETE	2. 4 CITY-ST-ZIP	SD Change Addition
TITLE NAME	SD Manesiotis, Demetri G	J. J. Dillin	3.1 TITLE 3.2 NAME	Change LAddition
STREET ADDRESS	5100 TOWNE CENTER CIRCLE		3.3 STREET ADDRESS	LARRY ROSENBAUM Blud 4204
CITY-ST-ZIP	BOCA RATON FL 33486	- ·	3.4. CITY-ST-ZIP	Grermantown 40 20874
TITLE	DOOM INTO THE GOVE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	1
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	ļ
CITY-ST-ZIP		DECETE	5.4 CITY - ST - ZIP	Change Addition
TITLE		L. DELETE	6.1 TITLE	Change Addition
NAME STREET ADDRESS			6.2 NAME	
			6.3 STREET ADDRESS	
CITY-ST-ZIP	pertify that the information supplied with t	his filing does not qualify for	the exemption state	d in Section 119 07(3)(i) Florida Statutes I further certify that the information

Interest certain may may me mormation supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informational indicated on this annual report is strue 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.