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

P94000086505 (2)

FILED Apr 30 1998 8:00am Secretary of State

| 21 26 65-0535578 No. Suite, Apt. #, etc. Suite, Apt. #, etc. 5 Certificate of Status Desired \$8.75 / | pplied For |
|---|----------------|
| PALM BEACH GARDENS FL 33420 PALM BEACH GARDENS FL 33420 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 11/28/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0535578 No Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 / 5. | |
| PALM BEACH GARDENS FL 33420 PALM BEACH GARDENS FL 33420 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 11/28/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0535578 No Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 / 5. | |
| 3. Date Incorporated or Qualified 11/28/1994 28. Mailing Address 28. Mailing Address 4. FEI Number Ap. 26 65-0535578 No. Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 / 10 \$8 | |
| 2. PrIncipal Place of Business 2a. Mailing Address 4. FEI Number Ap 21 26 65-0535578 No Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 /r | |
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| Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 / | t Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 / | C Applionolo [|
| | dditional |
| 22 27 Fee Re | quired |
| City & State 6. Election Campaign Financing \$5.00 | , I |
| 28 Trust Fund Contribution Added to | o Fees |
| Zip Country Zip Country B. This corporation owes or has paid the current year Int | |
| | 3 No |
| 9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent WEICOMAN DALII 81 Name | |
| WEISOMAN, PAUL | i |
| 129 GOLFVIEW CT. 82 Street Address (P.O. Box Number is Not Acceptable) | |
| PALM BEACH GARDENS FL 33418 | |
| | ļ |
| 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 | o registered |
| office or registered agent, or both, in the State of Florida, Such change was authorized by the cornoration's board of directors. Thereby accept the appointment as | registered |
| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | |
| SIGNATURE Signature, typed or printed name of registered agent and trice if applicable (NOTE Registered Agent signature required when reinstating) DATE | |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | S IN 12 |
| TIFLE P DELETE 1.1 TIFLE Change | Addition |
| NAME WEISSMAN, PAUL M 12 NAME | j |
| STREET ADDRESS 129 GOLFVIEW CT. 1.3 STREET ADDRESS | |
| CITY-ST-ZIP PALM BEACH GARDENS FL 33418 1.4 CITY-ST-ZIP | • |
| TITLE P DELETE 2.1 TITLE Change | Addition |
| NAME WEISSMAN, ROLAND J 2.2 NAME | |
| STREET ADDRESS 129 GOLFVIEW CT. 23 STREET ADDRESS | |
| CITY-ST-ZIP PALM BEACH GARDENS FL 33418 2 4 CITY-ST-ZIP | J |
| TITLE DELETE 3.1 TITLE Change | Addition |
| NAME 3.2 NAME | ļ |
| 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 | į |
| STREET ADDRESS 4.3 STREET ADDRESS | 1 |
| CITY-ST-ZIP 4.4 CITY-ST-ZIP | |
| TITLE DELETÉ 5.1 TITLE Change | ☐ Addition |
| NAME 5.2 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 | ļ |
| STREET ADDRESS 6.3 STREET ADDRESS | |
| 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If further certify that the | information |

indicated on this annual report or supplied many does not quality for the exemptor stated in Section 1.18.07(3)(i), filtring doubles. Find the important indicated on this annual report or supplied 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 report 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 change), or only a placetiment with an address.