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

**PROFIT CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000088266 (9) DOCUMENT #

7824 COLLINS, INC.

**FILED** Apr 08 1998 8:00am Secretary of State



							(8)81 1811 <b>1</b> (1818 8)	
Principal Place of Business Mailing Address								
4000 HOLLYWOOD BLVD 4000 HOLLYWOOD BLVD			)					
265 SOUTH HOLLYWOOD FL 33021		SUITE 265 SOUTH HOLLYWOOD FL 33021	SUITE 265 SOUTH			DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualified		
						12/06/1994		
2. Principal Pl	ace of Business	2a. Mailing Address	<del></del>			4. FEI Number	ΙΔι	plied For
21		26				65-0538870		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired		equired
City & State	· · · · · · · · · · · · · · · · · · ·	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	
Zip	Country	Ζφ	Count			8. This corporation owes or has paid the	current year Int	tangible
24	25	29	30	<b>[0</b> ]		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Registers	d Agent	
EIS	INGER, DENINIS J			81 1	Name			
400	00 HOLLYWOOD BLVD		82 Street A		Street Address	ss (P.O. Box Number is Not Acceptable)		
SU	ITE 265 SOUTH					Grade (1.0. Box Hambor to Hot Proceptable)		
HOLLYWOOD FL 33021			- 1	83				
			ł	84 (	City		<b>85</b> Zip	Code
					· · · · · · · · · · · · · · · · · · ·	F	-	
office or re	o the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida, Such change was a	authorized	1 hv th	named corpor ne corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the a	or changing it ppointment as	registered
	Tribinillar with, and accept the oblig	ations of, becalon our bood, the	Orion Glas	GIOS.				
SIGNATURE	Signature, typed or printed name of registered ag-	ent and bile if applicable (NOT	E: Registered	Agent s	signature required	when reinstating) DATE		I.
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		R\$ IN 12
TITLE	DPT	☐ DELETE	1.1 TO	LE			☐ Change	Addition
NAME	FERRUCCIO, BELLI		1.2 NA	ME				
STREET ADDRESS	4000 HOLLYWOOD BLVD #2	265S	1.3 ST	REET AD	DRESS			
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CIT		ZIP			
TITLE	SD	☐ DELETE	2.1 10	LE			☐ Change	Addition 1
HAME	CHIARATO, UGO V		2.2 NA	ME		V		
STREET ADDRESS	220 71 ST STE 213		2.3 ST	REET AD	DRESS			
CITY-ST-ZIP	MIAMI BEACH FL		2. 4 CITY-		ZIP			
TITLE	DELETE 3.1 T		3.1 Tf1	l€			Change	Addition
NAME			3.2 NA	ME	1			ļ
STREET ADDRESS			3.3 <b>\$</b> T	REET AD	DRES\$			
CITY-ST-ZIP				TY-ST-	ZIP			
TITLE		☐ DELETE 4.1 1		LE			Change	☐ Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REET AD	DRESS			
CITY-ST-ZIP				FY-ST-Z	ZIP			
TITLE		☐ DELETE	5.1 TIT	LE			☐ Change	Addition
NAME			5.2 NA	ME	1			
STREET ADDRESS			5.3 ST	REET AD	DRESS			
CITY-ST-ZIP			5.4 CI	Y-ST-2	ZIP			
TITLE		DELETE	6.1 TR	LE	_		Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	reet ad	DRESS			ļ
CITY-ST-ZIP			6.4 CI	ry-st-2	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. 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.

SIGNATURE: