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 # P94000088748 (6)

HERITAGE HOUSE, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										1 1001/001 110 10111 01014 0014 0014 001	II) Baiği (bi	il totti tobit		II
441 NORTHEAST 4TH AVENUE 441 NORTHEAST 4TH AVEN									Į					
FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 333								-		DO NOT WRITE IN THIS SPACE				
									<u> </u>	3. Date Incorporated or Qualified	111110	HAOL		
										12/07/1994				
2. Principal P	lace of Busi	noss		2a. Mailing Address						4. FEI Number			Applied Fo	or
21				26						65-0559071			Not Applica	able
Suite, Apt.	#, etc.			Suite, Apt. #, etc						5. Certificate of Status Desired		•	5 Additiona	al
22					City P. State								Required	
City & State					City & State				'	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country					Zip Country					Trust Fund Contribution				
24	25			29	30				Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent						
BC	NETT					81	Name							
44	41 NE 4TH	AVENUE						2 Street Address (P.O. Box Number is Not Acceptable)						
FT	. Lauderd	DALE FL 33	301					Construction (1.0. Sex Names 15 Not Acceptable)						
							83							
İ							84	City	· · · · · · · · · · · · · · · · · · ·		-	85 Zi	p Code	\neg
44 Durations	to the provin	logo al Cant	607 01 00 -	60	7 4600 Florida Parti.	Ann 45-					FL	<u> </u>	9	
office or	egistered ac	gent, or both	in the State of I	Florid	a. Such change was	authoriz	ed by	the corp	poration's	tion submits this statement for the p s board of directors. I hereby accep	ot the appo	changing bintment a	as registere	ed
	ım tamıllıar w	ith, and acce	epi ino onligatiol	ns or,	Section 607.0505, FI	orida St	atutes	> .						
SIGNATURE	Signature, typed	d or printed manual	of registere:1 agent ar	id ble i	applicable (NO	IE Register	ed Age	nt signature	required wh	nen reinstating)	DATE			ے
12.		OI	FICERS AND D	DIRECTORS			13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	_		
TITLE	DPS	TT DONING	-		DELETE	1.1	TITLE					Change	e 🗌 Addi	lition
NAME	BARNETT, BONNIE 441 NE 4TH AVE.													2
STREET ADORESS	FORT LAUDEDDALE EL 22201							1.3 STREET ADDRESS						ļŭ
CITY-ST-ZIP TITLE	DVPT		L 1 L 00001		DELETE		CITY-S TITLE	T-ZIP				Change	e	iiios Č
NAME		ROBERT					NAME					C) Outlige	, 1,,,,,,,	
STREET ADDRESS		4TH AVE					-	ADDRESS						
CITY-ST-ZIP	EODT LAUDEDDALE EL 2220							ST-ZIP			•			į
TITLE							3.1 TITLE					Change	e 🔲 Addi	lition
NAME				3.2 NAME										
STREET ADDRESS	ADDRESS							3.3 STREET ADDRESS						
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NAME					L. Dittell		NAME					La charge	. L Adu	
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NAME							NAME					•	_	
STREET ADDRESS						- 6		ADDRESS						
CITY-ST-ZIP							CITY - SI							
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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.