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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 30 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000088933 (4)

CORPO	orate image internation	NAL, INC.			
Principal Place	no of Pusiones	Mailing Address		_	<b>8</b> 1 1811 <b>8</b> 1818 <b>1</b> 18188 (1811 18 <b>1</b>
_ ·					
1304 SW 160TH AVENUE					
FORT LAUDERDALE FL 33326 FORT LAUDERDALE FL 33326			326	DO NOT WRITE IN THIS	SPACE
us		US		3. Date Incorporated or Qualified	
				12/08/1994	
<del></del>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Cuite Act	#	Suite, Apt. #, etc.		65-0538563	Not Applicable
Suite, Apt.		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25 9. Name and Address of Curren		30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
				In. Hame and Address of her hogistered	7,3011
SCRAPER, DEBORAH A. 730 CRYSTAL COURT			00 00 0 0	(5.0. B N	
1	LAUDERDALE FL 33326		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
''	ENODE: IDALE 1 & 000E0		83		
			84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corpo	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	of changing its registered
office or agent. I a	registered agent, or both, in the State am familiar with, and acceptathe obliga	of Florida. Such change was a atily's of, Section 607,0505, Flo	uthorized by the corporation	on's board of directors. I hereby accept the app	pointment as registered
SIGNATURE	Juliorahle	SXUWIN DE	BORAH A. SCI	raper 1-1	8-98
	Signature, typed or printed name of registered age	int and title if applic to the (NOTE	Registered Agent signature require	d when reinstating) DATE	
12.	OFFICERS ANI	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS ANI	DIRECTORS IN 12  Change Addition
TITLE	SCRAPER, STEPHEN K.	☐ DEFEIE	1.1 TITLE		L Grange L Adustron
NAME	730 CRYSTAL CT.		1.2 NAME		
STREET ADDRESS	FT. LAUDERDALE FL		1.3 STREET ADDRESS		
City-St-ZiP	VSTD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	SCRAPER, DEBORAH A	<u></u>	2.2 NAME		T our de T vour en
STREET ADDRESS	730 CRYSTAL CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
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		
STREET ADDRESS			4.3 STREET ADDRESS		
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		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
			6.3 STREET ADDRESS		

14. I hereby certify that the information supplied with this filling 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: 1/18/98 (954)349-2880