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 #

P95000006177 (6)

ONE WITH, INC.

Principal Place of Business Mailing Address

FILED Apr 14 1998 8:00am Secretary of State



| 565 N.W. 98TH AVENUE PLANTATION FL 33324 | | 565 N.W. 98TH AVENUE PLANTATION FL 33324 | | | | | |
|---|--|---|---------------------|--|--|---------------|-------------------------------------|
| | | | | | DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 0.1/20/1005 | 3 SPACE | |
| | - (D) | 1 Con Martine Address | | | 01/20/1995 4. FEI Number | - 1. | |
| Principal Place of Business The Principal Place of Business | | 2a. Mailing Address | | | 65-0548719 | | oplied For ot Applicable |
| I Suite, Apt. #. etc. | | Suite, Apl. #, etc. | Suite, Apl. #, etc. | | 5. Certificate of Status Desired | | Additional |
| 22 | | 27 | | | 5. Octanical of Glades Besiles | | equired |
| City & State | | City & State | 28 | | Election Campaign Financing Trust Fund Contribution | | May Be to Fees |
| Zip 24 | Country 25 | Zip 29 | 30 Co | untry | This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. | | |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| SEIDERMAN, RONALD 81 | | | | | | | · |
| 565 N.W. 98TH AVENUE | | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| PLANTATION FL 33324 | | | | 0.000 | 3,000 (1.0. 50,000,000,000,000,000,000,000,000,000, | | |
| | | | | 63 | | | |
| | | | | 84 City | F | | Code |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508, Florida Statute | es, the a | bove-named cor | rporation submits this statement for the purpose | of changing i | ts registered |
| 11. Pursuant to the provisions of Soctions 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | |
| SIGNATURE | | | | | | | |
| | Signature, typed or printed name of registered a | | | d Agent signature requ | | | |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE | PSO SEIDERMAN, RONALD | ☐ DELETE | 1.1 T | 1 | | Change | ☐ Addition |
| NAME STREET ADDRESS | 565 N.W. 98TH AVENUE | | 1.2 N | TREET ADORESS | | | |
| CITY-ST-ZIP | PLANTATION FL 33324 | | | HTY-ST-ZIP | | | |
| TITLE | VPTD DELETE 2.17 | | | | Change | Addition | |
| NAME | A STATE OF THE A STATE OF THE S | | IAME | | • | | |
| STREET ADDRESS | 565 N.W. 98TH AVENUE | | | TREET ADDRESS | | | |
| CITY-ST-ZIP | PLANTATION FL 33324 | | | CITY-ST-ZIP | | | i |
| TITLE | DELETE 3.11 | | | | | ☐ Change | ☐ Addition |
| NAME | | | 3.2 N | AME . | | | i |
| STREET ADDRESS | | | 3.3 S | TREET ADDRESS | | | |
| CITY - ST - ZIP | | | 3.4. | CITY-ST-ZIP | | | |
| TITLE | | ☐ DELFTE | 4.1 1 | ITLE | | Change | ☐ Addition |
| NAME | | | 4. 21 | NAME | | | İ |
| STREET ADDRESS | | | 4.3 S | TREET ADDRESS | | | |
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| TITLE | | ☐ DELETE | 5.1 T | | | Change | Addition |
| NAME | | | 5.2 N | | | | |
| STREET ADDRESS | | | | TREET ADDRESS | | | |
| CITY+ST-ZIP | | ☐ DELETE | | CITY-ST-ZIP | | Change | Addition |
| TITLE | | | 6.1 7 | | | LI CHANGE | \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ |
| NAME CTOCCT ADDRESS | | | 6.2 N | | | | |
| STREET ADDRESS | | | 1 | TREET ADDRESS | • | | |
| CITY-ST-ZIP | | | ■ 6.4 € | 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. I further certify that the information indicated on this annual report is furue 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: