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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500006825 (0)

ROBIN A. KOCIELKO, C.P.A., C.F.P., P.A.

FILED Apr 22 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address								
12300 ALTERN	VATE AIA	215 5TH ST.								
110 STE 200 PALM BEACH TPL 33401						DO NOT WRITE IN THIS SPACE				
THE PALM DEACH PENSON						3. Date Incorporated or Qualified				
	•					01/24/1995				
	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For]
	EAGLE LAKE	26 SAME				<u>65-0552873</u>			t Applicable]
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State						5. Certificate of Status Desired		\$8.75 Additional		
City & State City & State City & State City & State						 Election Campaign Financial Trust Fund Contribution 	ng 🗆	\$5.00 Added t		1
Zip	Country	Zip	Cou	ntry		8. This corporation owes or ha				1
334	1 8 25	29	30	-		Personal Property Tax due	•] No	
	Name and Address of Current	Registered Agent				10. Name and Address of Ne	v Registere	d Agent]
	CIELKO, ROBIN A		}	B1 Name						
	00 ALTERNATE A1A		ŀ			ss (P.O. Box Number is Not Acce	eptable)			1
	ITE 110		ļ		<u> २०</u> ९	EAGLE LAKE	- DR	LUE		1
PAL	M BEACH GARDENS FL 33410			83						
			1	84 CV7)		0 000 4 6 000	21C E	85 Zip (Code	1
44 Purcuant to	o the provisions of Sections 607.0502	and 607 1508. Florida Statute	ne the at	V P	COLDO	BEACH GARDE	ns F		<u> </u>	4
office or re	egistered agent, or both, in the State of	d Florida. Such change was a	authorized	by the cor	poratio	n's board of directors. I hereby a	ccept the ar	ppointment as	registered	1
•	m familiar with, and accept the obligat	ions of, Section 607.0505, Fig	rioa Siat	utes.						
SIGNATURE	Signature, typed or printed name of registered agents	and title if applicable (NOTI	: Registered	Agent signatur	e required	when reinstating)	DATE			-
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO C	FFICERS A	ND DIRECTOR	S IN 12]6
TITLE	D	DEL é té	1.1.10	Lξ	D/¢			Change Change	☐ Addition	25
NAME KOCIELKO, ROBIN A			1.2 NA	12 NAME R		BIN A. KOCIEU	40			2
STREET ADDRESS	12300 ALTERNATE A1A, SUITI	= 110	, 1.3 ST	REET ADDRESS		509 EAGLE LAK			,	١Ď
CITY-ST-ZIP	PALM BEACH GARDENS FL	DELETE		Y-ST-ZIP	PA	in Beach Garde	<u>ns fl</u>			۱ķ
TITLE		L DELETE	2.1 1(1					L Change	☐ Addition	
STREET ADDRESS			2.2 NA	ime Reet address	ł					
CITY-ST-ZIP				TY-S1-ZIP	ļ					ı
TITLE		DELETE	3.1 TIT		 			Change	Addition	1
NAME			3.2 NA	ME				-		
STREET ADDRESS			3.3 ST	REET ADDRESS						
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP	Í					
TITLE		☐ DEL ete	4.1 111	LE				Change	☐ Addition	1
NAME			4. 2 N/	AME						
STREET ADDRESS			4.3 ST	REET ADDRESS						
CITY-ST-ZIP		T pri ere		Y-ST-ZIP	├			[] (b	4 4 8 8 4 4	-
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NAME			5.2 NA							
STREET ADDRESS			4	REET ADDRESS	l					1
TITLE		DELETE	5.4 UH	Y-ST-ZIP Le	├			Change	Addition	1
NAME			6.2 NA		1					
STREET ADDRESS				REET ADDRESS	1					
CITY-ST-ZIP				Y-ST-ZIP						
14. Lhereby co	ertify that the information supplied will	this filing does not qualify fo	r the exe	motion state	ed in Se	ection 119.07(3)(i), Florida Statut	es. I further	certify that the	information	1
officer or o	on this annual report or supplemental director of the corporation or the recoi or Block 13 of changed, or on an attact	ver or trustee empowered to (urate and Recute ti	inat my signis report as	gnature s requir	ed by Chapter 607, Florida Statu	ites; and tha	it my name app	u iam,an ⊃earsin	
SIGNATI	URE: 90.6c	LL&AC	<u>ب</u> (<u>ILL</u>	4	2-16-9	8(20)	137 79	00	