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FILED
Mar 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000008107 (1)

1. Corporation Name

IT'S ALL IN THE HANDS, INC.

Principal Place of Business

1800 GLADES ROAD
450
BOCA RATON FL 33431
US

Mailing Address

1900 GLADES ROAD
450
BOCA RATON FL 33431
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1995

4. FEI Number

65-0551641

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

SCIARRETTA, STEVEN A ESQ.
2300 GLADES ROAD
SUITE 302E
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME D
STREET ADDRESS SCIARRETTA, STEVEN A ESQ.
CITY-ST-ZIP 1900 GLADES ROAD, SUITE 355
BOCA RATON FL 33431

1.2 NAME ☐ DELETE

NAME P
STREET ADDRESS CARTER, MELANIE
CITY-ST-ZIP 1900 GLADES ROAD STE 450
BOCA RATON FL 33431

1.3 NAME ☐ DELETE

1.4 NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 NAME ☐ DELETE

1.6 NAME
STREET ADDRESS
CITY-ST-ZIP

1.7 NAME ☐ DELETE

1.8 NAME
STREET ADDRESS
CITY-ST-ZIP

1.9 NAME ☐ DELETE

1.10 NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby 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: *Melanie Carter* MELANIE CARTER

3/12/98

CP2E034 (10/97)