## 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 #

P95000014127 (1)

REACHIT INC.

## **FILED** Apr 22 1998 8:00am Secretary of State



						<u> </u>		<b>           </b>	D)  1807 1881	
Principal Place of Business Mailing Address										
8336 SUNM Boca Rato	EADOW LANE DN FL 33496		8336 SUNMEADOW LANE BOCA RATON FL 33496			DO NOT WITH	TE IN TAILO (	DAOE		
						DO NOT WRI		PAGE		
						3. Date Incorporated or Qualifie 02/20/1995	u 			
2. Principat	Place of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number		A	pplied For	
21		26				65-0739738		N₁	ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be				
23						Trust Fund Contribution			to Fees	
Zip	Country	Zip	Co	untry		8. This corporation owes or has	paid the cur	rent year In	tangible	
24	25	29	30			Personal Property Tax due Ju	ne 30. 🛚 🖺	Yes [	□ No	
	9. Name and Address of Curre	nt Registered Agent		I		10. Name and Address of New	Registered .	Agent		
В	ernstein, melvin			81	Name					
	336 SUNMEADOW LANE		82 Street Ad			ess (P.O. Box Number is Not Accep	tabla)			
	OCA RATON FL 33496		Street Ac			ess (F.O. BOX NUMBER IS NOT Accep	lable)			
_				83						
				84	City		FL	85 Zip	Code	
44 Durauan	t to the provisions of Sections 607.05	02 and 607 1508 Florid	a Statutos the s	abovo.	named corr	poration submits this statement for the			te registered	
office or	registered agent, or both, in the Stat am familiar with, and accept the obli	e of Florida. Such chanr	ae was authorize	ed by I	the corporat	ion's board of directors. I hereby acc	cept the app	ointment as	registered	
SIGNATURE	Signature, lyped or printed name of registered a	gent and tele if applicable	(NOTE Register	ed Agen	l signature requir	ed when reinstating)	DATE	· · · · · · · · · · · · · · · · · · ·		
12.	OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12	
TITLE	D	DE	LETE 1.1 1	TITLE				☐ Change	☐ Addition	
NAME	BERNSTEIN, MELVIN		1.2 h	NAME						
STREET ADDRESS	8336 SUNMEADOW LANE		1.3		DDRESS					
CITY-ST-ZIP	BOCA RATON FL 33496		1.4 (	CITY-ST	- ZIP					
TITLE		DE		TITLE				Change	☐ Addition	
NAME			2 2 NAME							
STREET ADDRESS			2 3 STREET ADDRESS		ODBESS					
	CITY-SI-ZIP		2. 4 CITY-ST-ZIP				1			
TITLE		DE		TITLE				Change	Addition	
NAME				NAME				_ •		
STREET ADDRESS	. [			STHEET A	IUDBESS					
				CITY-ST						
CITY-ST-ZIP TITLE	<del> </del>	DEI DE		HTLE	- 711			Change	Addition	
NAME				NAME						
				STREET A	nunbecc					
STREET ADDRESS	1									
CITY-ST-ZIP	<del> </del>	DE		CITY-ST- TITLF	- CIP			Change	Addition	
TITLE								Unungo	, addition	
NAME				NAME						
STREET ADDRESS	·}			STREET A						
CITY-ST-ZIP		T be		CITY-ST	- ZIP			Change	Addition	
TITLE		DEI		TITLE				Change	☐ Addition	
NAME				NAME						
STREET ADDRESS	6 <b> </b>		6.3 9	STREET A	ADDRESS					
CITY-ST-ZIP	<u> </u>			CITY-ST						
44 I harahu	certify that the information supplied	with this filippy clope and a	numblify for the ex	romoti	on etalad in	Section 119 07/3VI) Florida Statutes	: I further ce	atify that the	intormation -	

I nereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report is required to each 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 grapowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an additions.