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 #

P95000022210 (5)

FILED Mar 10 1998 8:00am Secretary of State

Principat Pia 9900 STIRLI SUITE 227 COOPER CI	EVENTS, INC. ce of Business ING ROAD ITY FL 33024 Place of Business I. #, etc.	Mailing Address 9900 STIRLING SUITE 227 COOPER CITY F 28. Mailing Addre 26 Suite, Apt. #, 27 City & State 28	L 33024	DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/17/1995 4. FEI Number 65-0579658 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution DO NOT WRITE IN THIS SPACE Applied For Not Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
Zιρ	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	 Name and Address of Curre OROSHOW, MICHELE L 	ent Registered Agent	81 Nam	10. Name and Address of New Registered Agent
S C			83 84 City/	med corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
12.	······································	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PSTD DOROSHOW, MICHELE L 9900 STIRLING ROAD, SUIT COOPER CITY FL 33024	□ DEI T E 227 □ DE	1,2 NAME 1,3 STREET ADDRESS 1,4 CITY-ST-ZIP	Change Addition Change Addition Cooler City, F. 33024 Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DEI	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP E1E 3.1 TITLE	
NAME STREET ADDRESS CITY-ST-ZIP			3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP	ESS
TITLE NAME STREET ADDRESS CITY-SI-ZIP		□ D€I	ETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DEI		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP		□ DEI		Change Addition
14. I hereby indicated officer of	certify that the information supplied on this annual report or supplement of director of the corporation or the rector Block 13 if changed, or on an att	ital annual report is true ceiver or trustee empow	jualify for the exemption sta and accurate and that my serod to execute this report i	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am an it as required by Chapter 607, Florida Statutes; and that my name appears in