## 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 # P95000023042 (1)

JOHN J. VON UTTER & SON, INC.

## FILED Mar 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						U 1901/4001 140 \$8181 U 1414 BB174 DB174				
265 S. US HWY ONE 265 S. US HWY ONE										
TEQUESTA FL			TEOUESTA FL 33469							
								DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address							03/20/1995 4. FEI Number		1 14-	mlind For
	iace or Business		2a. Mailing Address						<del></del>	pplied For ot Applicable
Suite, Apt.	# Atc	26 Suite 4	Suite, Apt. #, etc.				65-0571116		\$8.75	
22	m, <del>g</del> io.	<u> </u>	27				5. Certificate of Status Desired		Fee Re	
City & State	9		City & State				6. Election Campaign Financing		\$5.00	
23		28	28				Trust Fund Contribution		Added	
Zip Country		Ζιρ					8. This corporation owes or has p	aid the cu	rrent year Int	angible
24	25	29		30			Personal Property Tax due Jur			] No
	9. Name and Address of Curre	nt Registered Ag	ent		81		10. Name and Address of New F	egistered	Agent	
BRAMS, DANIEL J						Name				
1645 PALM BEACH LAKES BLVD., STE. 1050					82	Street Ac	dress (P.O. Box Number is Not Acceptable)			
	ST PALM BEACH FL 33401									
					83					İ
					84	City			<b>85</b> Zip (	Code
						,		<u> </u>	.	
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										
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 Slonature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									· ····	
12.		ID DIRECTORS	,,,,,	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	S IN 12
TITLE				1.1 70	'LE				Change	Addition
NAME	VON UTTER, MARC			1.2 NA	ME					
STREET ADDRESS					1.3 STREET ADDRESS					
CITY-ST-ZIP	TEQUESTA FL 33469			1.4 CI	ry-si	T-ZIP				
TITLE			DELETE	ETE 2.1 TITL		Î			Change	☐ Addition
NAME			2.2 NAME							
STREET ADDRESS				2.3 STREET ADDRESS						
CITY-ST-ZIP				2.4 C/TY-ST- DELETE 3.1 TITLE				-, -		
TITLE				3.1 TII	ſLξ				Change	Addition
NAME				3.2 NA	ME					i
STREET ADDRESS				3.3 ST	REET	ADDRESS				
CITY-ST-ZIP				3.4. CI	TY-S	IT-ZIP		<u> </u>		
TITLE			DELETE	4.1 717	LE				Change	Addition
NAME				4. 2 N	AME					
STREET ADDRESS				4.3 ST	REET	ADDRESS				
City - ST - ZIP				4.4 Cf	TY - S1	T-ZIP				
TITLE			DELETE	5.1 717	LE	T	-		Change	Addition
NAME				5.2 NA	ME					
STREET ADDRESS				5.3 ST	REET	ADDRESS				
CITY-ST-ZIP				5.4 CI	TY - 51	T - Z(P			_	
TITLE			DELETE	6.1 717	LE				☐ Change	☐ Addition
NAME				6.2 NA	ME					
STREET ADDRESS				6.3 ST	REET	ADDRESS				
CITY-ST-ZIP				6.4 CI	TY-SI	T - 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 11 if changed, or on an attachment with an address.