## 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 # P95000024343 (2)

DEB-LLOYD CORP.

**FILED** Apr 13 1998 8:00am Secretary of State

District Discrete District					<u>-</u> {	<b>  1</b>     1    1    1    1    1    1	
Principal Place of Business Mailing Address							
21000 BOCA RIO ROAD 21000 BOCA RIO ROAD #C4							
BOCA RATON FL 33434 BOCA RATON FL 33434					DO NOT WRITE IN THIS SPACE		
<b>US</b> US					3. Date Incorporated or Qualified		
		T "1"			03/22/1995		
2. Principal Plac		2a. Mailing Address 26 8122 GLT	2701	0 *	4. FEI Number	<del></del>	Applied For
21 8122 Suite, Apt. #.	GLADES RD,	26 5 3 6 F	10(Z	ISD.	65-0569084		Not Applicable
22 352 27 352					5. Certificate of Status Desired		Additional Required
City & State  City & State  City & State  City & State			<b>-</b>	٥.	6. Election Campaign Financing		May Be
23 BOC P		<u> </u>	MOT	Er	Trust Fund Contribution		d to Fees
	Country	Z022/3/1	Country	/	8. This corporation owes or has p		Intangible
24 554	9, Name and Address of Current I	29	21	<del> </del>	Personal Property Tax due Jun  10. Name and Address of New R		140
COLE		inginion right	81	Name	10. 110110 01101100 011100 1	- John College	
GOLDMAN, STEPHEN							
5173 PACIFIC BLVD.				Street Address (P.O. Box Number is Not Acceptable)			
APT #3108 BOCA RATON FL 33417							
DOOM NATOR FL 33417							
			84	•,			p 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.							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or profiled name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		DRS IN 12
TITLE	PST	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	GOLDMAN, STEPHEN		1.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS	2.3		2.3 STREET	ADDRESS			1
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE		☐ OELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				j
STREET ADDRESS			3.3 STREE1	ADDRESS			Ì
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				1
STREET ADDRESS			4.3 STREET	ADDRESS			ĺ
CITY-ST-ZIP			4.4 CITY - S	IT- ZIP			
TIFLE		☐ DELETE	5 1 TITLE			Change	Addition
NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREET	ADDRESS			ł
CITY-ST-ZIP		T becere	5.4 CITY - S	ST-ZIP		174	T paragraph
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				-
CITY-ST-ZIP	tifu that the information number with	thingliffs does not qualify for t	6.4 CITY - S		Section 110 07/21/i) Elected Statutes	I further eastiful that the	no information