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PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000025566 (7)

FILED Mar 18 1998 8:00am Secretary of State

Principal Plac 584 NW 16TH BOCA RATOR	COURT	Mailing Address 584 NW 16TH COURT 80CA RATON FL 33486		3. Date incorporated or Qualified 03/30/1995 4. FEI Number	TE IN THIS SPACE	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		65-0568822	60 75	Additional
22		27		5. Certificate of Status Desired		Required
City & Stat	e	City & State		6. Election Campaign Financing		May Be
Zip	Country	28	Country	Trust Fund Contribution 8. This corporation owes or has		to Fees
4	25	_ ├ ─ `	30	Personal Property Tax due Jui	· •	□ No
<u> </u>	9. Name and Address of Curre			10. Name and Address of New I		
FIL	INGS, INC.	······································	81 Name	·		
	32 NW 18TH STREET LAUDERDALE FL 33311		83 84 City	dress (P.O. Box Number is Not Accept		Code
anent La	m lamiliar with land accord the oblic	ations of Section 607 0505. Flo	rida Statutes	allore board of directors. Friereby acc	sept the appointment e	o registered
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE	Registered Agent signature req		DATE	
SIGNATURE	Signature, typed or printed name of registered ag			quired when reinstaling) ADDITIONS/CHANGES TO OFF	DATE	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS AN D THOMASON, FRANCIS M 584 NW 16TH COURT	ent and fille if applicable (NOTE	Registered Agent algoalure req 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS	quired when reinstaling) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS AN D THOMASON, FRANCIS M	ent and fille if applicable (NOTE	Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	outred when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO	PRS IN 12
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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.