## 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 # P95000026672 (2)

ROOMMATE FINDERS OF FLORIDA, INC.

Principal Place of Business Mailing Address

5353 N. FEDERAL HWY. #212 5353 N. FEDERAL HWY. #212

FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308

## FILED Apr 23 1998 8:00am Secretary of State



5353 N. FEDERAL HWY. #212 FT. LAUDERDALE FL 33308						5353 N. FEDERAL HWY. #212 FT. LAUDERDALE FL 33308									DO NOT	WRITE	IN THIS	SPACE	:		
													3.		Date Incorpora 03/31/1995	ted or Qua			<u> </u>	-	
2. Principal Place of Business						2a. Mailing Address						4, FEI Number						Ap	plied For		
21						26						ļ		65-058659	<del>)6</del>		· · · · · ·			t Applicable	
Suite, Apt. #, etc.						Suite, Apt. #, etc.						5.	. c	Certificate of Si	atus Desir	ed				dditional quired	
23	City & State					City & State													\$5.00 May Be Added to Fees		
24	Zip		25 Zip 29						Country 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No								
		g, Name	and A	ddress of C	urrent R	egist	ered Age	nt		81			10.	۱,	lame and Add	iress of N	ew Re	gistered	Agent		
	FELDMAN, SUSAN										1	Vame									
5353 N. FEDERAL HWY. #212 Ft. Lauderdale Fl 33308										82	5	Street Addre	ress (P.O. Box Number is Not Acceptable)								
										83							·····			.,	
										84	-(	City						FL	85	Zip (	Code
11	office or re	egi <b>ste</b> red ag	jerit, or	both, in the	State of f	lorid	a Such d	hange was	authori	zed by	/ th	iamed corpo ne corporation	oration on's b	on a	submits this st ard of director	atement fo s. I hereby	r the p	urpose of the app	f chan pointme	ging its	s registered registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE																					
40	Signature, typod or printed name of registired agent and title if applicable (NOTE: Registere										ent s	signature require				NOTO TO	OFFIC	DATE	D/DF	07.00	O IN L 40
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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 arrival 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.

Mayon Folding

4/15/98 asymania