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May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000027216 (7)

1. Corporation Name

CHEROKEE TAYLOR, INC.

Principal Place of Business

1536 N.E. 27TH COURT
POMPANO BEACH FL 33064

Mailing Address

1536 N.E. 27TH COURT
POMPANO BEACH FL 33064



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 6303 N. Powerline Road

Suite, Apt. #, etc.

22 Suites 5 & 6

City & State

23 Fort Lauderdale Fl.

Zip

24 33309

25 Broward

2a. Mailing Address

26 same

Suite, Apt. #, etc.

27 City & State

City & State

28 Fort Lauderdale Fl.

Zip

29 33309

Country

30

3. Date Incorporated or Qualified

04/03/1995

4. FEI Number

65-0567202

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ANGELINO, MICHAEL J
1536 N.E. 27TH COURT
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

82 Angelino, Michael J.

83 1637 E. N.E. 55th Str

84 City

Fort Lauderdale

FL

85 Zip Code

33334

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.

SIGNATURE

Michael J. Angelino

MICHAEL J. ANGELINO President

DATE 4/28/98

12. OFFICERS AND DIRECTORS

TITLE PCD ☐ DELETE
NAME ANGELINO, MICHAEL J
STREET ADDRESS 1536 N.E. 27TH COURT
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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STREET ADDRESS
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PCD ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS Angelino, Michael J.
1.4 CITY-ST-ZIP 1637 E. N.E. 55th St.

2.1 TITLE Fort Lauderdale, Fl. 33334 ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael J. Angelino

MICHAEL J. ANGELINO

1-800-214-4570

CR2E034 (10/97)