## 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 # 1. Corporation Name P95000031787 (1)

CONTRACT PARTNERS, INC.

## **FILED** Jan 16 1998 8:00am Secretary of State



Principal Plac	o of Business	Mailing Add	iross					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ID DRIVE. BAY #7		1000 HOLLAND DRIVE. BAY #7						
BOCA RATOR	N FL 33487	BOCA RAT	BOCA RATON FL 33487			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						04/24/1995			
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number	I TA	pplied For	
21		26				65-0649326	<b></b>	ot Applicable	
Suite, Apt.	#, etc.		ot.#, etc.					Additional	
22		27	27			5. Certificate of Status Desired		equired	
City & Stat	0	City & Si	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28	28			Trust Fund Contribution		Added to Fees	
Zip	Country Zip			Country		8. This corporation owes or has p	paid the current year In	langible	
24	25	29	30	<u> </u>		Personal Property Tax due Jur		No No	
	9. Name and Address of Curre	nt Registered Ago	ent	_	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New F	egistered Agent		
KIN	MELMAN, NED			81	Name (	Lev Bosontha	Esa		
LAI	KE WYMAN PLAZA			82	Street Arte	dress (P.U. Box Number)'s Not Accept	able)	1-0	
242	24 N. FEDERAL HIGHWAY, SUIT	E 157			12	5/75 Eagle	Vest Lan	e sal	
ВО	CA RATON FL 33487			83	_	<i>•</i>		_	
				84	City 161		<b>■■ 85</b> Z(p	Code	
					<i>  [[</i> 4].	land Lakes	・FLITIプ	2014	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, i	londa Statutes,	the abov	e named col	rporation submits this statement for the	purpose of changing i	ts registered	
agent. La	egistered agent, or both, in the State m familiar with, and a <u>ccost t</u> he onlig	e of Florida, Such ( jations of, Section	charige was aut 607.0505, Floric	norized b la Statule	y the corpora s.	ation's board of directors. I hereby acc	opt the appointment as	registered	
SIGNATURE	and CTal		Rosenti				1/8/97	- 1	
SIGIRATORIE.	Signature, typed or printed name of registered ag	ent and title if applicable	(NOTE B	logistorekt Ag	ent signature requ	uired when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFF	CERS AND DIRECTOR		
711LE	D	L	DELETE	1.1 TIBLE			Change	Addition	
NAME	GULDEN, KIM			1.2 NAME				l;	
STREET ADDRESS	1000 HOLLAND DRIVE, BAY	#7		1.3 STREET	ADDRESS			[8	
CITY-ST-ZIP	BOCA RATON FL 33487			1.4 CITY-5	ST - ZIP			8	
TITLE	D	L	DETEJE	2 1 TITLE	i		Change	Addition C	
NAME	GULDEN, JAMIE			22 NAME					
STREET ADDRESS	1000 HOLLAND DRIVE, BAY	<i>#</i> 7		23 STHEE	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33487		<b>_</b>	2 4 C/TY-	SI - ZIP				
TALF		L	] DELETE	3.1 THLE			☐ Change	☐ Addition	
NAME				3.2 NAME				ļ	
STREET ADDRESS				3.3 STREET	ADDRESS			ĺ	
CITY-ST-ZIP			<u>.</u>	3.4. CITY -	\$1 - ZIP				
TITLE			] DELFTE	4.1 1111.6			Change	Addition	
NAME				4. 2 NAME	1				
STREET ADDRESS				4.3 STREET	ADDRESS				
City-St-ZIP				4.4 CHY - 9	31 - ZIP				
TITLE			DELETÉ	5.1 TITLE	· - 1		☐ Change	Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREFT	AODRESS				
CITY-ST-ZIP				54 CHY-S	1 · ZIP				
TITLE			DELETE	61 HILE			Change	Addition	
NAME				6.2 NAME					
STREET ADDRESS				63 STREET	ADDRESS			-	
CITY-SI-ZIP				6.4 CITY-S					
dd Lboroburn	adily that the information ourselled in	itt. this diline doos	not munify for th	0.4 0111-2	tion stated is	e Costian 110 07/2Vi). Horida Statutan	t to return a martitude than the		

Thereby certify that the information supplied with this biling does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes I further certify that the information indicated on this annual report or supplicmental arrival 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