## 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 P95000033676 (4)

JOE ALVAREZ & ASSOCIATES, INC.

Principal Place of Business

934 N. UNIVERSITY DRIVE SUITE 306 CORAL SPRINGS FL 33071 Mailing Address

934 N. UNIVERSITY DRIVE

Suite 306

DO NOT WRITE IN THIS SPACE CORAL SPRINGS FL 33071 3. Date Incorporated or Qualified

04/25/1995

## **FILED** Jan 30 1998 8:00am Secretary of State



Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Suite, Apt. #, etc.  5. Certificate of Status Desired  6. Election Campaign Financing From Factor of Status Desired  Fee Required  Fee Required  Form Required  State  Country  State  Country  State  Country  State  Country  State  State  State  Country  State  State	Za. I i i i i i i i i i i i i i i i i i i			Maniful Address			4. FEI NUMBER	Applied For	
Colly & State   Colly & Colly   Colly & State   Colly & State   Colly & State   Colly & Colly   Colly & State   Colly & Colly   Colly & Coll	21		26	26			65-0579041	Not Applicable	
City & State   City & C	Suite, Apt. #, etc.						5. Certificate of Status Desired		
23				ite			6. Flection Campaign Financing	\$5.00 May Bo	
Zip   Country   Zip   Country   But   Supportation owes or has paid the current year intanglial	23						,		
9. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  ALVAREZ, JACKIE 934 N. UNIVERSITY DRIVE SUITE 306  CORAL SPRINGS FL 33071  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 807 0502 and 907,1508. Forrise Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent, or both, in the State of Porride, Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent, or both, in the State of Porride, Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent, or both, in the State of Porride, Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent tam finalize with, and accept the obligations of, Section 607 0505, Porride Statutes.  SIGNATURE    Description   Descrip		Country	<del></del>		Country				
ALVAREZ, JACKIE 934 N. UNIVERSITY DRIVE SUITE 306 CORAL SPRINGS FL 33071  82 Street Address (P.O. Box Number is Not Acceptable)  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 is registered didnot or registered agent, or both, in the State of Rendes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered didnot or registered agent, or both, in the State of Rendes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered didnot or registered agent, or both, in the State of Rendes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered didnot or registered agent, and the state of Rendes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered didnot of registered agent, and the state of Rendes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered didnot state and the registered agent sprature required when reheating)  2. OPERCENS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Name  12. Initial	24	25	25 29 30			· · · · · · · · · · · · · · · · · · ·			
ALVARCE, JACKE  934 N. UNIVERSITY DRIVE  SUITE 306  CORAL SPRINGS FL 33071  83  44 City  FL 85 Zip 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 segistered 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 office or segistered 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 office or segistered 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 office or segistered agent are the registered agent and the registered agent are the registered agent and the registered agent are the								<u> </u>	
SUITE 306 CORAL SPRINGS FL 33071  82 Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84 City	ALVAREZ JACKIE				81	Name		=	
SUITE 306 CORAL SPRINGS FL 33071  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florids Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS IN 12  12. NAME  ALVAREZ, JOE  13. INTITE  12. NAME  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  14. STREET ADDRESS  14. STREET ADDRESS  15. STREET ADDR					00	60.00	(0.0.0		
CORAL SPRINGS FL 33071    84					82	Street Addre	ess (P.O. Box Number is Not Acceptable)	·	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, or and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   Authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   DATE	COUNT OLUMO LE 2001 L								
11. Parsuant 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 agent. I am familiar with, and accept the obligations of, Section 607, 0505, Florida Statutes.    SIGNATURE					84	City		85 Zip Code	
SIGNATURE	11 Purcuant	to the provisions of Sections 607.0	1502 and 607 1509 Ein	rido Statutos, th	o shous	namad corne		f changing its registered	
SIGNATURE	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								
12.	agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE	SIGNATURE ADJACO ASSOCIATION OF THE SIGNATURE ADJACO ASSOCIATION O								
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1880 BARCELONA TERRACE   13 STREET ADDRESS   1.4 CITY-ST-ZIP				<b>I</b> '				Change Addition	
MARGATE FL 33063			10E						
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CITY-ST-ZIP 6.4 CITY-ST-ZIP				B		ADDRESS			
		certify that the information supplied	with this filing does no				Section 119.07(3)(i), Florida Statutes, I further cer	rtify that the information	

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:

1-21-98

954-975-8366