

FILE NOW: FILING FEE AFTER MAY 1ST IS \$500

FILED
Apr 27 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 # P95000034114 (5)

1. Corporation Name
CFV PRODUCTS, INC.



Principal Place of Business Mailing Address

**3251-A S.W. 13TH DR.
 DEERFIELD BEACH FL 33442** **3251-A S.W. 13TH DR.
 DEERFIELD BEACH FL 33442**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	3710 Northeast 25th Avenue	26	3710 Northeast 25th Avenue	04/27/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
				65-0579490	Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Lighthouse Point, Florida	28	Lighthouse Point, Florida	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Zip 33064	25	Country US	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
29	Zip 33064	30	Country US		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WENZEL, KENNETH A 980 N. FEDERAL HWY. SUITE 440 BOCA RATON FL 33432				81	Name C. Christian Sautter, Esq.		
				82	Street Address (P.O. Box Number is Not Acceptable) 2900 East Oakland Park Boulevard		
				83	Suite Suite 200		
				84	City Fort Lauderdale	85	Zip Code FL 33306

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: *C. Christian Sautter* DATE: **4/20/98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STRONG, JEFFREY			1.2 NAME	John R. Newton		
STREET ADDRESS	485 ROYAL PALM WAY			1.3 STREET ADDRESS	3710 Northeast 25th Avenue		
CITY-ST-ZIP	BOCA RATON FL 33432			1.4 CITY-ST-ZIP	Lighthouse Point, Florida 33064		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				2.2 NAME	Michael Newton		
STREET ADDRESS				2.3 STREET ADDRESS	2930 Medinah		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	Weston, Florida 33332		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				3.2 NAME	Gillian Callaghan		
STREET ADDRESS				3.3 STREET ADDRESS	62 Walnut Street		
CITY-ST-ZIP				3.4 CITY-ST-ZIP	Wellesley, MA 02181		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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)(j), 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 treasurer 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: *John R. Newton*

CFR2034 (10/97)