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

	MENT # P950 EMENT ASSETS CONSU		9 (8)				114 £114 1016 0010 1011 1014
Principal Place of Business Mailing Address							HID DHID HAD BIID BIID HOH HOU
3601 HOLLYWOOD BLVD 3801 HOLLYWOOD BLVD							
NATIONS BANK BLDG NATIONS BANK BLDG							
HOLLYWOOD	FL 33021-6729	HOLLYWOOI	HOLLYWOOD FL 33021-6729			DO NOT WRITE IN THIS	SPACE
						3. Date Incorporated or Qualified	
						04/27/1995	
·	lace of Business	 1	2a. Mailing Address			4. FEI Number	Applied For
21			26			65-0572266	Not Applicable
Suite, Apt.	#, e(C.	⊢	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & Stat	Δ	City & Sta	City & State				<u></u>
23	•	<u>⊢</u> , ′	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 / Z / Z / Z / Z / Z		Country	——————————————————————————————————————	8. This corporation owes or has paid the cu	·
24	25	29	- -	0			rrent year intangible X Yes ☐ No
	9. Name and Address of Cu					10. Name and Address of New Registered	·
KA	TZIN, ALFRED J			81	Name		
	3801 HOLLYWOOD BLVD					ress (P.O. Box Number is Not Acceptable)	
NATIONS BANK BLDG				62	Street Addi	ress (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL 33021-6729							
				84	0.4	· · · · · · · · · · · · · · · · · · ·	Table 19: Odd
				64	City	FL	85 Zip Code
SIGNATURE	Signature, typed or printed name of registere	d agent and title if applicable		Registered Ago		poration submits this statement for the purpose of the portion's board of directors. I hereby accept the appropriate the properties of the properties of the purpose of the	
12.		AND DIRECTORS	DE: FFF	13.		ADDITIONS/CHANGES TO OFFICERS ANI	
TITLE	UMUITTHODAIC CUZADET		DELE TÉ	1.1 TITLE	j		Change Addition
NAME	WHITTHORNE, ELIZABETI 3801 HOLLYWOOD BLVD			1.2 NAME	1		
STREET ADDRESS	HOLLYWOOD FL 33021-6			1.3 STREET	address		
CITY-ST-ZIP	HOLL14100D FL 33021-6		DC+ CTC	1.4 CITY - S	- ZIP		August 1
TITLE		L	DELETE	2.1 TITLE			Change Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET	l l		
CITY-ST-ZIP			DELETE	2.4 CHY-S 3.1 TITLE	1 - Z(P		Change Addition
NAME			DELLTE	3.1 HILE	ļ		C Shango C Addition
STREET ADDRESS				3.2 NAME 3.3 STREET	ADDDECC		
				1			
TITLE			DELETE	3.4 CITY-S 4.1 TITLE	1-211		☐ Change ☐ Addition
NAME		-		4. 2 NAME	-		
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP			i	4.4 CITY - ST			ĺ
TITLE			DELETE	5.1 JUTLE	-"		Change Addition
NAME		_		5.2 NAME	}		
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP			İ	5.4 CITY-ST			
TITLE			DELETE	6.1 TATLE	-"		☐ Change ☐ Addition
NAME				6.2 NAME)		
CTOCCT ANDDECC				6.3 STREET	INDBESS		

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 to an attachment with an address.

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FILED

Jan 27 1998 8:00am

Secretary of State