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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000039469 (8)

MAHARG NECEP, INC.

FILED Jan 21 1998 8:00am Secretary of State

| PRINCIPAL PLACE OF BUSINESS  SOCIOUS CARGORIES BUTON N. SUITE 201  SAST BULDING  BOCA RATON R. 33431  2. PRINCIPAL SUID SUID SUID SUID SUID SUID SUID SUID   |   |   |  |                                       |                          |  |  |  |               |
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| Suite, Apt. 8, etc.    Suite, Apt. 8, etc.   Suite, Apt. 8, etc.   S. Certificate of Status Desired   S. S. Actionate   S. S. Certificate of Status Desired   S. Certificate   S. Ce |   | 73 1001 1556  | ₩ <i>600</i> 279   | W                                     | (2) /SF                  | (7)                                    |  | <del></del>                                      |               |
| Special Composition    |   | #. etc.   |  | ,,,,                                  |                          | 03-036 10 16                           |  |  |               |
| Clay   Column   Clay   C   |   | , 5.57  | <b>⊢</b>   | **                                    |                          | 5. Certificate of Status Desire        | ಶ 🕰  |  |               |
| 20   20   20   20   20   20   20   20  |   | 10 1 11   | <del></del>  | 0                                     | F /                      | 6. Election Campaign Financi           | ng   | \$5.00   | May Be        |
| Solid   Soli   | 23 (010   |   | <del></del>  | 1111                                  | 741 FC                   | ' '                                    |  |  |               |
| S. Name and Address of Current Registered Agent  BREDE, J. DANIEL  BREDE, J. DANIEL  1900 CORPORATE BLVD., N.W., SUITE 201  EAST BUILDING  BOCA RATON FL 33431  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Fursuant to the provisions of Sections 807 0502 and 807 1508, Florida Statutes, life 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 submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Statutes, life above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and an arrival agent, and accept the outgestered office or segment agent are applicated agent, and accept the outgestered office or segment agent are agent and accept the outgestered of 2,000, Florida Statutes.  SIGNATURE  12 OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11ITLE  PD DELETE 1.1 TITLE  PECEN, DANIEL J  STREET ADDRESS  CITY-ST-2P JONESS ROAD  ORAL SPRINGS FL 33071  1.4007-ST-2P  1.30 PRICE ROAD  2.3 SINET ADDRESS  CITY-ST-2P  JONESSOROUGH TN 37659  2.4 CITY-ST-2P  JONESSOROUGH TN 37659  DELETE 3.1 TITLE  CRAIL SPRINGS FL 33071  DELETE 3.1 TITLE  CRAIL SPRINGS FL 33071  DELETE 3.1 TITLE  Change Addition  Addition  STREET ADDRESS  CITY-ST-2P  JONESSOROUGH TN 37659  DELETE 5.1 TITLE  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 33071  DELETE 5.1 TITLE  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 33071  DELETE 5.1 TITLE  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 33071  DELETE 5.1 TITLE  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 33071  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 33071  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 33071  Change Addition  ADDITIONS/CHANGES  CORAL SPRINGS FL 3 | _ <i>റ</i> ാഗ   | 21 County   |  |                                       |                          | ~ <del></del>                          |  | _  | _ ~ _         |
| BREDE, J. DANIEL  1900 CORPORATE BLVD., N.W., SUITE 201  EAST BUILDING  BOCA AATON FL 33431  82  Street Address (P.O. Box Number is Not Acceptable)  11. Fursuant to the provisions of Sections 807 0502 and 607.1508, Florida Statutes, the decorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Porida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Porida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered diffice or registered agent, and accept the collegations of, Section 607.6505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  12. OFFICERS AND DIRECTORS  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. TITLE  13. TITLE  14. Change Addition  23. TITLE  15. TITLE  16. Change Addition  24. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  15. TITLE  16. Change Addition  25. TITLE  27. NAME  28. TITLE  28. ADDITIONS/CHANGES AND CHANGES AND CH | 24 5 50   | 1 20 77 0 0101  |  | 30 2                                  | 20 Wan                   | 7                                      |  |  |               |
| BRELLY, J. LANIEL 1900 CORPORATE BLVD., N.W., SUITE 201 EAST BUILDING BOCA RATON FL 33431  38  39  44 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 507 0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and accept the object of Provisions of Sections 507 0502, and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and accept the object of Provisions of Sections 507 0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and accept the object of the opporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the object of the opporation of the purpose of changing its registered agent. I am lamiliar with, and accept the object of the opporation of the purpose of changing its registered agent. I am lamiliar with, and accept the object of the opporation |   |   |  |                                       |                          |  |  |  |               |
| EAST BUILDING BOCA RATON FL 33431  83  84 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 puriouse of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the puriouse of changing its registered agent, and statutes, the above-named corporation submits this statement for the puriouse of changing its registered agent, and statutes accept the chipdigathors of, Section 697,0505, Florida Statutes.  SIGNATURE  Signature, types or private rating of registered agent and tile if application.  PD  |   | · ·   |  |                                       | 1481116                  |  |  |  |               |
| BOCA RATON FL 33431    83  |   |   |  |                                       | 82 Street Ad             | ldress (P.O. Box Number is Not Acc     | eptable)                                       |  |               |
| 11. Pursuant to the provisions of Sections 807 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, 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 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, and accept the obligation of, described when refreshing the provided florida state in the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the opposition of change in the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the purpose of changing its registered directors. I hereby accept the pur |   |   |  |                                       | 83                       |  | <del></del>                                    |  |               |
| 11. Pursuant to the provisions of Sections 607 (502 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, and accept the obligations of, Section 697.0505, Florida, Statute or or personal provision and accept the obligations of, Section 697.0505, Florida, Statute or or personal provision and accept the obligations of, Section 697.0505, Florida, Statute or or personal provision and accept the obligations of, Section 697.0505, Florida, Statutes, Invalidation of the provisions of sections of the provision and the statement for the purpose of changing its registered of office or registered agent, or both with the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information supplied with this filling dogs not goality for the exemption stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information stated in Section 119.07(3)(), Florida Statutes, If urther certify that the information stated in Section 119.07( | ВО  | DATERION I E 3040 I   | •  | ļ                                     |                          |  |  |  |               |
| SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  |   |   |  |                                       | 84 City                  |  | FL   | <b>85</b> Zip (                                  | Code          |
| SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  | 11. Pursuant t  | to the provisions of Sections 607,0502  | and 607.1508, Florida Statute                                    | s, the at                             | ove-named co             | orporation submits this statement for  | the purpose of                                 | f changing it                                    | s registered  |
| SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  | office or re<br>agent. I a  | egistered agent, or both, in the State on familiar with, and accept the obligat | of Florida, Such change was a<br>sions of, Section 607,0505, Flo | uthorized<br>rida Stat                | i by the corpor<br>utes. | ration's board of directors. I hereby  | accept the app                                 | ointment as                                      | registered    |
| 12   |   |   |  |                                       |                          |  | 1  |  | (             |
| TITLE  | Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requi |   |  |                                       |                          | · · · · · · · · · · · · · · · · · · ·  |  |  |               |
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| TITLE S DELETE 4.1 TITLE   | ſ   | IONECOCO DOLLOTTE OTOPO   |  | •                                     | [                        |  |  |  | i             |
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| CITY-ST-ZIP  CORAL SPRINGS FL 33071  4.4 CITY-ST-ZIP  ITILE  DELETE  5.1 TITLE  5.2 NAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Addition  NAME  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  1.4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information  | f   | · · · · · · · · · · · · · · · · ·   |  |                                       | ì                        |  |  |  | }             |
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| NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  Addition  6.2 NAME  5.3 STREET ADDRESS  6.1 TITLE  Change Addition  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  14.   hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information   |   | CONAL SPRINGS PL 3307 I   | DELETE   |                                       |                          | · · · · · · · · · · · · · · · · · · ·  |  | Change   | Addition      |
| STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information   | ſ   |   |  | •                                     | ſ                        |  |  | CT Ottaligo                                      | L Addition    |
| CITY-ST-ZIP  TITLE  DELETE 6: TITLE  6.2 NAME  STREET ADDRESS  CITY-ST-ZIP  14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information  |   |   |  | •                                     | 1                        |  |  |  |               |
| TITLE  DELETE 6.1 TITLE  Change Addition  6.2 NAME  STREET ADDRESS  CITY-ST-ZIP  14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information   | Į.  |   |  |                                       | ,                        |  |  |  | 1             |
| NAME  STREET ADDRESS  CITY-ST-ZIP  14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information   |   |   | DELETE   |                                       |                          |  |  | Change   | Addition      |
| STREET ADDRESS  CITY-ST-ZIP  14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information   | 1   |   |  | I I                                   |                          |  |  |  |               |
| 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   | 1   |   |  | 8                                     | ł                        |  |  |  | }             |
| 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information   |   |   | _  | 1                                     | 1                        |  |  |  |               |
|  | 14. I hereby c  | ertify that the information supplied with                                       | this filing does not qualify fo                                  | r the exe                             | motion stated            | in Section 119.07(3)(i), Florida Statu | tes. I further ce                              | rtify that the                                   | information   |

14. I hereby certify that the information supplied with this filling does not dualify 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:

Pare dan 9 98 954 755 4596