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

DO	CUMEN I	# P9500	0039897 (0)						
I		PERTIES, INC.	, ,						
"		i cirrico, ino.					E AN ONCOPI AND COLOR DESIGNATION DOCTOR AND F	8 3100 1816) 1818 1811 1811 1811	
Principal Place of Business			Mailing Address				1 1991; par 110 (010) 41111 49111 94111 95111 5511	d reink adame abead abera adde adde	
5255 N FEDERAL HWY			5255 N FEDERAL HWY						
3RD FLOOR BOCA RATON FL 33487			3RD FLOOR BOCA HATON FL 33487				DO NOT WRITE IN THIS SPACE		
BUCA	MATUN PL 33407		DUCA HATUN FL 33487				3. Date Incorporated or Qualified		
1							05/19/1995		
2. Prir	Principal Place of Business		2a. Mailing Address				4. FEI Number	Applied For	
21			26				65-0585514	Not Applicat	ble
. Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22 City & State			City & State				 	Fee Required	
			28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23 Zip	Zip Country		Zip Country			8. This corporation owes or has paid the			
24	25		29 30			Personal Property Tax due June 30.	Yes No		
9. Name and Address of Curre				1021	·		10. Name and Address of New Register		
	BEILLY, BRA	DFORD J ESQ		81	Nam	e			
790 EAST BROWARD BLVD.				82	Stree	et Addre	ess (P.O. Box Number is Not Acceptable)		
SUITE 200									
FT. LAUDERDALE FL 33301				83	1				
			84 City				85 Zip Code		
		18 20 000 000						-L 69 2 p 000 0	
11. Pu	irsuant to the provi fice or registered a	isions of Sections 607.050 igent, or b oth, in the State	32 and 607.1508, Horida Statu ∋ of Florida. Such change was	ites, the abov authorized b	e∙name y the co	id corpo prporatii	oration submits this statement for the purposion's board of directors. I hereby accept the	ie of changing its registere appointment as registered	od d
ag	jent. I am f a miliar v	with, and accept the oblig	ations of, Section 607.0505, F	lorida Statute	5 .			-	i
SIGNA	TURE Standburg type	ed or printed name of registered ag	ion and title if aprilicable (NO	1L: Registered An	ont skinah	ure require	ed when reinstating) DAT	· ·	
12.			ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	·	
TITLE	D		DELETE	1.1 TITLE				Change Additi	ion
		in, Bruce D		1.2 NAME	1.2 NAME				
		i Federal Hwy		1.3 STREET	1.3 STREET ADDRESS				
		RATON FL 33487		1.4 CITY-S1-ZIP					
TITLE	D	*****	☐ DEL€TÉ	2.1 TITLE		1		∟ Change ∟ Additi	on
NAME PARK, GERAL				22 NAME		Ì			
STREET ADDRESS 5255 N FEDERAL H					2.3 STREE1 ADDRESS				
CATY-ST-			DELETE	2. 4 CITY - ST - ZIP		-	· · · · · · · · · · · · · · · · · · ·	Change Additi	on.
TITLE	S	***************************************		3.17(TLE		ľ		☐ Grange ☐ Addre	gn
NAME	STREET ADDRESS 5255 N. FEDERAL HWY.			3.2 NAME 3.3 STHEET ADDRESS					
	CITY-ST-ZIP BOCA RATON FL		3.4. CHY-ST-ZIP		1				
TITLE			DELETE	DELETE 4.1 TITLE				Change Additi	on.
NAME				4. 2 NAME		Ì		·	
STREET ADDRESS 5255 N. FEDERAL HWY.			4.3 STREET		;				
CITY-ST-ZIP BOCA RATON FL			4.4 CITY-ST-7IP						
TITLE			DELETE	51 TITLE				Change Addition	on
NAME				5.2 NAME					
STREET A	D D RESS			5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 CITY- \$1-7IP					
TITLE	1		DELFTE	6 1 TITLE				Change Addition	on
NAME				6.2 NAME					
STREET A	DDRESS			6.3 STREET	ADDRESS	.			

6.4 CITY-S1-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 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 eath; 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.

Feb 18 1998 8:00am

Secretary of State