## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 24 1998 8:00am

Secretary of State

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000039908 (5)

730 DUVAL STREET INVESTMENTS, INC.

Principal Place of Business Mailing Address									E 10021001 178 10102 04111 00111 00111	OBER OF IOU FIL	110 1911 <b>(</b> 1011) 80	AND AND AND A
730 DUVAL ST 208 DUVAL S												
KEY WEST F	L 33040	KEY WEST FL 33040 US				1	DO NOT WRITE IN THIS SPACE					
00			00	•				-	3. Date Incorporated or Qualified			
									05/18/1995			
2. Principal P	lace of Busin	iess	2a. N	2a. Mailing Address					4. FEI Number		AF	plied For
21			Suite, Apl. #, etc.					65 <del>-</del> 0619018			ol Applicable	
Suite, Apt.	#, etc.		27	27					5. Certificate of Status Desired		\$8.75 / Fee Re	
- Sial	e		—	City & State				6. Election Campaign Financing		\$5.00		
23 Zip		Country	28	<b>Z</b> ip		Country			Trust Fund Contribution		Added t	
Zip <b>24</b>		25	29	ıβ	30	Couritry	,		<ol><li>This corporation owes or has personal Property Tax due Jui</li></ol>			angible No
		and Address of Curre		red Agent	[30]				o. Name and Address of New F			7140
CC	OHEN, JOS	EPH		<del></del>		81	Name	9	·····		<del></del>	
	8 DUVAL S		•			82	Street	Address	(P.O. Box Number is Not Accept	able)		
KE	Y WEST FL	. 33040		1		83	-					
						84	City			FL	85 Zip (	Code
11. Pursuant office or r agent I a SIGNATURE	ım tamılıar wi	ions of Sections 607.05 ent, or both, in the Stat th, and accept the oblining or printed name of registered a	gations of, S	Section 607.0505, F	Florida	Statules	3.		tion submits this statement for the s board of directors. I hereby acc	purpose o	if changing its	s registered registered
12.	organicae, types	OFFICERS A				13.	signato	ine requires in	ADDITIONS/CHANGES TO OFF		D DIRECTOR	IS IN 12
TITLE	D			DELETE	1	1.1 TITLE		T		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change	Addition
NAME		(EL, HAIM			1	1.2 NAME						
STREET ADDRESS 20191 COUNTRY CLUB DR			; <b>PH9</b> [ 1.33			1.3 STREET ADDRESS		1				
CITY-ST-ZIP		AI BCH FL 33180		Document.	_	1.4 CITY-S	T-ZIP	4			——————————————————————————————————————	
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NAME STREET ADDRESS		GLE AVE			_ I -	2.2 NAME	4000500	1				Ĭ.
CITY-ST-ZIP		ST FL 33040			_	2.3 STREET 2. 4 CITY - S						
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NAME					3	3.2 NAME						
STREET ADDRESS					3	3.3 STREET	ADDRESS					
CITY-ST-ZIP		·			3	.4. CITY- S	ST-ZIP	<u> </u>				
TITLE				☐ DELETE	4	4.1 TITLE					Change	Addition
NAME						I. 2 NAME						
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NAME						i.2 NAME					Orkingu	
STREET ADDRESS						3 STREET	ADDRESS					
CITY-ST-ZIP						.4 CITY-S	-					

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 from a report is the 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 of sustee end inverse 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 attach has a vith an accurate.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

SIGNATURE.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP