- 98 B-4697 mc ING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 14 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000048861 (5)

| | LUXURY | / HOMES | BY ANTHONY, IN | C. | | | | | 1 10014001 HR HDIRI ONH ODHU DRHI ODH | 11 11 111 1 11 4 | L 1 010 1 1011 k 011 | DI 1161 (ES) |
|---|--------------|--|--------------------------|-----------------------------|---------------------|---------------------------|---------------|--------------------------------|---|---------------------------------------|--------------------------------------|----------------------------|
| <u>.</u> | | | | | | | | | | | | |
| Prir | ocipal Place | e of Business | | Mailing Address | | | | } | | | | |
| 7400 N FEDERAL HWY 7400 N FEDERAL HWY | | | | | | | | | | | | |
| #B-6 BOCA RATON FL 33487 | | | | #B-6 BOCA RATON FL 33487 | | | | | DO NOT WRITE IN THIS SPACE | | | |
| BOOK INTON IE 35407 | | | | BOOK BATON FE SOMO | | | | Ì | 3. Date Incorporated or Qualified | | | |
| l | | | | | | | | | 06/20/1995 | | | |
| 2. | Principal Pl | ace of Busine | ess . | 2a. Mailing Address | | | | | 4. FEI Number | | Ap | plied For |
| 21 | | | | | 26 | | | | 65-0656208 | | No | t Applicable |
| | Suite, Apt. | ilte, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 6. Certificate of Status Desired | | \$8.75 | |
| 22 | | | | 27 | | | | | S. Certificate of Glates Desired | | Fee Re | quired |
| | City & State | | | City & State | | | | 6. Election Campaign Financing | | \$5.00 | | |
| 23 | | | | 28 | | | | | Trust Fund Contribution | | bebbA | |
| | Zip | | | | | Country | , | ļ | 8. This corporation owes or has pai | _ | | -/~ |
| 24 | | 25 29 30 9. Name and Address of Current Registered Agent | | | | 30] | | | Personal Property Tax due June 10. Name and Address of New Reg | | Yes | No |
| | | | | negistereu | Agent | B1 | Name | | 10. Haine Bild Address of New Rei | Jintered 1 | Agent / | — |
| LOFFREDO, ANTHONY V | | | | | | | INDITIO | | | | | |
| 7400 N FEDERAL HWY | | | | | | 82 | Street | Addres | ss (P.O. Box Number is Not Acceptab | le) | | |
| #B-6 | | | | | | 83 | | | | | | |
| l | BO | CA RATON | FL 33487 | | | 63 | | | | | | ľ |
| l | | | | | | 84 | City | | | | 85 Zip (| Code |
| 44 D | | | | | | | L | | | <u>FL</u> | لـــــــــــــــــــــــــــــــــــ | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida. Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | ration submits this statement for the p n's board of directors. I hereby accep | orpose of the app | cnanging it ointment as | s registered registered |
| 1 | agent. I ar | m familiar with | n, and accept the obliga | tions of, Sect | tion 607.0505, Flo | rida Statute | 3. | | - ' | | | , |
| SIG | NATURE | | | | | | | | | | | |
| 12. | | Signature, lyped o | OFFICERS ANI | | | Registered Age | ont signature | required | when reinstaling) ADDITIONS/CHANGES TO OFFICE | DATE | DIRECTOR | C IN 12 |
| TITLE | | D | OFFICE NO ANI | THE CTOTA | DELETE | 1.1 TITLE | | 8 | ADDITIONS/CHANGES TO OFFIC | | Change | Addition |
| NAM | | - | O. ANTHONY V | | <i>y</i> | 1.2 NAME | | LOP | FREDO, ANTHONY V | | E.S. C.I.I.I. | |
| | ET ADORESS | | EDERAL HWY #B-6 | | | 1.3 STREET | ADDDECC | 740 | O N. FEDERAL HIGHWAY | #B6 | | |
| l ' | -ST-ZIP | | TON FL 33487 | | | 1.4 City-S | | | A RATON, PL. 35487 | | | • |
| TITLE | | DOOK IV | TON I E GOTO | | DELETE | 21 TITLE | I - ZIF | ST | | | Change | Addition |
| NAM | 1 | | | | | 2.2 NAME | | | FREDO, CAROUNE E | | | |
| | ET ADDRESS | | | | | 2.3 STREET | ADDRESS | 240 | O N. PYDURAL HIGHWAY | #84 | | |
| i | -S1-ZIP | | | | | 2. 4 CITY+! | | 2 00 | A RATON, EL 33487 | | | |
| TITLE | | | | | DELETE | 3.1 TITLE | SI-ZIF | DUC | | | Change | Addition |
| NAM | | | | | | 3.2 NAME | | | | | | |
| | ET ADDRESS | | | | | 3.3 STREET | AUUDECC | | | | | |
| J | -ST-ZIP | | | | | | | l | | | | |
| TITUE | | | | | DELETE | 3.4. CITY-S 4.1 TITLE | 51- ZIF | ├ - | | | Снапре | Addition |
| NAM | | | | | | 4.2 NAME | | 1 | | | onlingo | |
| 1 | ET ADDRESS | | | | | 4.3 STREET | ADDDECC | | | | | |
| l | -ST-ZIP | | | | | | | | | | | |
| TITLE | | | | | DELETE | 4.4 CITY - S 5.1 TITLE | I-ZIP | | | | Change | Addition |
| NAM | | | | | | 5.2 NAME | | | | | | - 1.30((())) |
| | ET ADDRESS | | | | | 5.2 NAME 5.3 STREET | AUDDECC | Į | | | | |
| l | | | | | | | | | | | | |
| TITLE | -\$1-2IP | | | | DELETE | 5.4 CITY-S 6 1 TITLE | 1-714 | | | | Change | Addition |
| NAM | | | | | | 6.2 NAME | | | | | viungo | |
| STREET ADDRESS | | | | | | *DODECC | 1 | | | | | |
| SIME | ET AUUHESS | | | | | 6.3 STREET | ADURESS | 1 | | | | |

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)(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 ori an attachment with an address. 3/27/98 SIGNATURE: