## 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

DOCUMENT # P95000053509 (2)

**FILED** May 13 1998 8:00am Secretary of State

TRADE	works of Broward, II	<b>√C</b> .			
Principal Place of Business Mailing Address				1 EBOTADU ATO EDIDA MATA BOTA BOTA BOTA BOTA	BILOS (1191 SIELI SOLIO 1914 (DO)
640 NW 71ST AVE 640 NW 71ST AVE					
PLANTATION FL 33317 PLANTATION FL 33317			DO NOT WRITE IN TH	IC CDACE	
				3. Date Incorporated or Qualified	IS SPACE
				07/06/1995	
2. Princinal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	and of Education	26		65-0052692	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curr	ent Registered Agent	<b>64</b> N	10. Name and Address of New Register	ed Agent
	amos, John		81 Name		j
640 NW 71ST AVE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
n.	INTATION FL 33317		83		
			63		
			84 City		85 Zip Code
44 Diversion	to the provisions of Continue COTO	602 and 607 1109 Florida Statuta	s the obeye period core	F	
11. Pursuant to the provisions of Sections 607.0502 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered	angul and this discoular abla (NOTE	Registered Agent signature requir	red when reinstating) DAT(	<del> </del>
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TOTLE		Change Addition
NAME	STAMOS, JOHN		1.2 NAME		
STREET ADDRESS	640 NW 71ST AVE		1.3 STREET ADDRESS		
City-St-ZiP	PLANTATION FL 33317		1.4 CITY - ST - ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		Change Addition
HAME	KLOB, TERRY		2.2 NAME		
STREET ADDRESS	6361 FALLS CIR DR		2 3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		İ
STREET ADDRESS			3.3 STREET ADDRESS		.
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		\
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-SI-ZIP		Lorenza	5.4 CITY-ST-ZIP		Change Later
TITLE		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP	C-4- 40 07/0V3 Flacida Otal 4- 15 Miles	

indicated on this annual report or supplied with this ining goes not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or suppliemental 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.

254-270-6202