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

P95000054956 (4) DOCUMENT #
1. Corporation Name

R.B. /G.D.Y. ACQUISITION, P.A.

APPRQVED

98 FEB 18 PM 1:30

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address					1 (BB11881 118 1819) B1111 BB111 BB111 BB111	00101 01111 01010 10101 BIR	<u> 10 1111 1101</u>
200 EAST BROWARD BLVD.			200 EAST BROWARD BLVD.				
15TH FLOOR		15TH FLOOR					
FT.LAUDERDALE FL 33301		FT.LAUDERDALE FL 33301		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 07/17/1995		
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	I lan	plied For
21	idos of Badinoso	26			65-0598777		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			¢0.75 .		
22		27		5. Certificate of Status Desired	Fee Red		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Re	
23		28			Added to		
Zip	Country Zip		Country	1	8. This corporation owes or has paid	the current year Inte	angible
24	25 29 30		30		Personal Property Tax due June 3	O. 🔲 Yes 🗌] No
	9. Name and Address of Curren	t Registered Agent	81	,	10. Name and Address of New Regi	stered Agent	
Krul, Michael H				Name			
200 EAST BROWARD BLVD. P.O. BOX 1900			62	Street Addre	ess (P.O. Box Number is Not Acceptable	1)	
	LAUDERDALE FL 33301		83				
			84	City		FL 85 Zip C	òde
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida State	utes, the abov	t e-named corp	oration submits this statement for the pur	rpose 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. I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes.							
	The latting with and accept the beings	itions of, occion our document, i	iorida Statule	٥.			
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NC	OTE. Registered Ag	ent signature require	ed when reinstaling}	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	3 IN 12
TITLE	DP	☐ DELETE	1.1 TITLE			Change	Addition
NAME	SCHUSTER, CARL	1.2 N			7000024:	35697-	7
STREET ADDRESS			1.3 STREET	ADDRESS	700002 4 : -02/19/9	8011040	05
CFTY-ST-ZIP	FT. LAUDERDALE FL 33301		1.4 CITY-5	ST-ZIP	****150.	.00 ****15	0.00
TITLE	DVST	DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME			2.2 NAME		•		
STREET ADDRESS	200 E. BROWARD BLVD.		2.3 STREET	ADDRESS			
CITY- A T-ZIP	FT. LAUDERDALE FL 33301		2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
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 - S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME		A 41	. 3	
STREET ADDRESS			5.3 STREET	ADDRESS	().////	11	
CITY-ST-ZIP			5.4 CITY - S	T-ZIP	u, ope		
TITLE		DELETE	6.1 TITLE		0.44 211	Change	☐ Addition
NAME			6.2 NAME		5/11	1"	
STREET ADDRESS			6.3 STREET	ADDRESS			
DITY OF THE			C L DITH C				- 1

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 on an attachment with an address.