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

PROFIT CORPORATION **ANNUAL REPORT** 1998 DOCUMENT # Principal Place of Business 128 CUYAHOGA ROAD LAKE WORTH FL 33467 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 25

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P95000068264 (7)

## **FILED** Apr 13 1998 8:00am Secretary of State

MARKET AVENUE, INC. Mailing Address 128 CUYAHOGA ROAD LAKE WORTH FL 33467 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/01/1995 2a. Mailing Address Applied For 26 65-0613828 Not Applicable Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 29 9. Name and Address of Current Registered Agent 0. Name and Address of New Registered Agent 81 Name BRAUN, JACK W 128 CUYAHOGA ROAD Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33467 83 84 City Zip Code 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE BRAUN, JACK W 1.2 NAME NAME 128 CUYAHOGA ROAD STREET ADDRESS 1.3 STREET ADORESS LAKE WORTH FL 33467 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE NAME BRAUN, L. KATHLEEN W 2.2 NAME STREET ADDRESS 128 CUYAHOGA ROAD 2.3 STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change 6.1 TITLE Addition TITLE NAME 6.2 NAME STREET ADDRESS **6 3 STREET ADDRESS** 

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 atlachment with an address.

**SIGNATURE:** 

4-7-98 561.964.4868