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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS 1998

FILED Feb 18 1998 8:00am Secretary of State

DOCU 1. Corporatio	MENT In Namio	# P9500	00071	527 (2)							
		TING INSTITUTE		•					A SPANSAN IN SERVICE AND A SAME BROWN BROWN BROWN IN	MAI HEBY ALMS	tkā ir kā du nā il l	
Principal Plac	e of Business		Mailin	Mailing Address					- I MACTION TO THE TOTAL DISTRIBUTION OF SEPTIMENT SEPTI	101 11041 <u>1</u> 1110	fekat tê ê fê bûn.	
1018 GRAND	ISLE TERR	1018	1018 GRAND ISLE TERRACE									
	I GARDENS F	PALM	PALM BEACH GARDENS FL 33418					DO NOT WRITE IN THIS	SPACE			
US									3. Date Incorporated or Qualified	OF AUE	.,	
									09/15/1995			
2. Principal Place of Business			2a. Ma	2a. Mailing Address					4. FEI Number		Applied For	
21			26						06-1109662		Not Applicable	
Suite, Apt.	#, etc		F · →	Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional	
City & State			[27]	City & State				- Floring Committee Committee		Required		
23				28				6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees		
Zip	<u>-</u>	Country	Zır		Co	ountry	7		8. This corporation owes or has paid the cu			
24	425			29 30					Personal Property Tax due June 30. Yes No			
		and Address of Curr				\perp	,		10. Name and Address of New Registered	Agent		
		A OF LAWRENCE J	SPIEGEL C	HRTD		81	Name	•				
	3 ALMERIA					Street	Addre	ess (P.O. Box Number is Not Acceptable)				
CO	JRAL GABLE	S FL 33134				83	 					
						City		FI	85 Zi	eboO c		
11. Pursuant	to the provisi	ons of Sections 607.0	502 and 607.1	508, Florida Stat	utes, the	above	e-name	dicorp	oration submits this statement for the purpose	of changing	its registered	
office or r	registered ag	ent, or both, in the Sta h, and accept the obl	ite of Florida 3	Such change was	s authoriz	ed by	v the co	rporati	ion's board of directors. I hereby accept the ap	pointment i	as registered	
SIGNATURE		•	•				-		•			
	Signature, typical	or proted having at registered r					ent signatui	re require	ed when reinstating) DATE			
12.	PD	OFFICERS A	ND DIRECTO	RS DELETE	13	TITLE		Τ	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO		
NAME :		REDRIC L		L. Otten		NAME					Addition	
STREET ADDRESS							1.3 STREET ADDRESS					
CITY-ST-ZIP	DALLA DELOU CADDENO EL			33418								
TITLE	STD			DELETE		TITLE	,,	 		Change	Addition	
NAME	WHITEH	ead, William			22	NAME						
STREET ADDRESS 1018 GRAND ISLE TERRACE							2 3 STREET ADORESS					
CITY-ST-ZIP							2 4 CITY-ST-ZIP					
TITLE				[_] DELETE	3.1	TITLE		1		☐ Change	Addition	
NAME						NAME						
STREET ADORESS	1						ADDRESS	}				
CITY-ST-ZIP TITLE	L			DELETE		CITY-S	ST-ZIP	┼		Change	Addition	
NAME				C) better		NAME						
STREET ADDRESS							ADDRESS	1				
CITY-ST-ZIP						CITY-S						
TITLE				☐ DELET€		TITLE		t^-		☐ Change	☐ Addition	
NAME					5.2	NAME						
STREET ADDRESS					5.3	STREET	ADDRESS					
CITY-ST-ZIP						CITY - S	T-7IP	<u> </u>				
TITLE				☐ DELETE		TITLE				Change	Addition	
NAME						NAME						
STREET ADDRESS							ADDRESS				ŀ	
CITY-ST-ZIP	I	/	_		6.4	CITY-S	T-ZIP	1				

14. Thereby certify that the information supplied windicated on this annual upper or supplement officer or director of the carporation or the rub Block 12 or Block 13 if changed of or an all as filling closs not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information number on the same logal effect as if made under oath; that I am an or trustery empoyeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

561 b24-0147