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

1. Corporation	MENT # NAME N FAMILY HO			3117 ((0)					 				
Principal Place	of Business		Ma	iling Address						i arafi addii dafii				
101 S CONGRESS AVE DELRAY BEACH FL 33445 US DELRAY BEACH FL 33445 US US									DO NOT WRITE IN THIS SPACE					
)	Date Incorporate 09/20/1995	d or Qualifie	d			
2. Principal Pl	ace of Business	28.	2a. Mailing Address					El Number				Applied For	. —	
21 16551 JOG RD			26	26 16551 JOB			5 RD		65-0641175				Vot Applica	ıble
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. (Certificate of Sta	tus Desired		\$8.75 Additional Fee Required		
City & State 23 DELRAY BEACH, FL.				City & State 28 DELLAY BEA			rcu, Fr.		lection Campai				D May Be	
Zip	C	ountry		Zip		untry		B. 7	his corporation	owes or has	paid the cu	rrent vear I	ntangible	-
24 334	25		29	33446	30			_ F	Personal Propert	y Tax due Ju	ne 30.	Yes _	□ No	
	g, Name and A	ddress of Curre	nt Regist	ered Agent		81	Name	10. 1	Yame and Addi	ess of New	Registered	Agent		
BO	ON FEDERAL HI	3432	02 and 60	07.1508, Florída Si	atules, the	82 63 84	City _	4000 1 Boca	D. Box Number N. FEDE TATON submits this sta	RAL Ha	هر FL	. 1 3	Code 343 t its register	red
SIGNATURE	egistered agent, on familiar with, and street agents of the street agents of the street agents agent			07.1508, Florida St la. Such change w , Section 607.0508 of applicable.				oration's bo		I hereby acc	DATE	pointment a	is registere	d
12,		OFFICERS AN	D DIREC		13			ΑE	DDITIONS/CHAP	NGES TO OF	FICERS AN			
TITLE	PD			☐ DELETE	1.1	TITLE		P/S/D				Change	Addi	lion
NAME STREET ADDRESS						NAME STOCET	ADDRESS		n, Flober Grande		1.3 4 11			
CITY-ST-ZIP BOCA RATON FL 33496						CITY-S			RAY SE					
TITLE	DOON INTO	112 00430		DELETE		TITLE	11-21			Just, FC		Change	Addi	tion
NAME					2.2	SMAN								
STREET ADDRESS					23	STREET	ADDRESS							
CITY-ST-ZIP					2.4	CITY-S	ST-ZIP				,			
TITLE				DELETE		TITLE		·				Change	Addi	tion
NAME					3.21	NAME								
STREET ADDRESS					3.3	STREET	ADDRESS							
CITY-ST-ZIP					3.4.	City-5	ST-ZIP							
TITLE				DELETE		TITLE					.,	Change	Addi	tion
NAME					4.2	NAME								
STREET ADDRESS					4.3	STREET	ADDRESS							
CITY-ST-ZIP						CITY-S	i							
TOTLE				☐ DELETE		TITLE		·				Change	Addi	tion
NAME					5.2	NAME								
STREET ADDRESS					5.3	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 together or director of the corporation or the receiver or together or director of the corporation or the receiver or together or directors are required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with any did less.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

561-637-0110

Change

Addition

FILED

Apr 06 1998 8:00am

Secretary of State