## 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 # P95000076455 (1)

BRAD	STEVEN FLEET, P.A.				
Principal Place of Business Mailing Address  1111 LINCOLN ROAD MALL 1111 LINCOLN ROAD MALL PENTHOUSE 802 PENTHOUSE 802  MIAMI BEACH FL 33139 MIAMI BEACH FL 33139				OO NOT WRITE IN THIS SPACE	
MIAMI DEAU	1 FC 33139	MIAMI BEACH FL 33138		3. Date Incorporated or Qualified 10/05/1995	IO OF NOE
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number 65-0634176	Applied For Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	e	27 City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
	<ol> <li>Name and Address of Curr INGS, INC.</li> </ol>	ent Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
	32 N.W. 16TH STREET RT LAUDERDALE FL 33311		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
dd Dwynash	to the equiplose of Sparious CO7.0	EOO and EO7 1500. Florido Ptot	84 City	F	
office or r agent. I a SIGNATURE	registered agent, or both, in the Sta im familiar with, and accept the obl	ate of Florida. Such change was ligations of, Section 607,0505, F	authorized by the corpora lorida Statutes.	poration submits this statement for the purposition's board of directors. I hereby accept the a	ippointment as registered
	Signature, typed or printed name of registered		TE Registered Agent signature requ		
12,	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition
YITLE NAME	FLEET, BRAD S		1.1 TITLE 1.2 NAME		FI change FI Monton
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139	The second	1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		□ Strote	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME exocct adobted			4. 2 NAME 4.3 STREET ADDRESS		
STREET ADORESS City-St-Zip			4.3 STREET AUDRESS		
TITLE		☐ DELETE	5.1 TITLE	·	☐ Change ☐ Addition
NAME			5.2 NAME		- • <del>-</del> -
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
7.7. 6		DELETE	C 1 TOTAL		Change Addition

14. Thereby 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 chapter 607 or other attachment with an address

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

ATURE AND TYPED ON PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4/27/98

305 5348200

**FILED** 

May 08 1998 8:00am

Secretary of State

CR2E034 (10/9)