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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000088983 (8)

C. S. BENSCH, INC

FILED Apr 16 1998 8:00am Secretary of State



| Principal Place | of Business | Mailing Address | • | ((GA)(AB) (IR IRIS BINK BAKK BA | tet mmini mitelit imiði tärið siljár í | 18:44 11:11 1841 |
|---|--------------------------------------|---|------------------------------|--|--|------------------------|
| 3801 SOUTH OCEAN DRIVE #3K 3801 SOUTH OCEAN DRIVE #3K HOLLYWOOD FL 33019 4 | | | | | | |
| HOLLIWOOD | FL 33018 | HOLLYWOOD FL 33019 | A | DO NOT W | RITE IN THIS SPACE | |
| | | | ı | 3. Date Incorporated or Qualif | ed | |
| | | | | 11/20/1995 | | |
| | ace of Business | 2a. Mailing Address | 4178T | 4. FEI Number | | Applied For |
| 21 3 | 20MW118.2 | 7 28 8 650 N | W (/ B S | ST 65-0657404 | | Not Applicable |
| Suite, Apt. (| F, eic. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | Additional Required |
| City & State | <u> </u> | City & State | | A Florida Company Financia | | |
| _ `` ` ` ` ` | Ami FL | 28 M M m | II_ | 6. Election Campaign Financir Trust Fund Contribution | | May Be |
| Zip | Country | Zip | מי יצור | | | |
| 24 330 | 15 25 US H | 2015 30 | T X H | Personal Property Tax due | | □ No |
| | 9. Name and Address of Curre | ent Registered Agent | | 10. Name and Address of Nev | Registered Agent | |
| VEREBAY, LAYNE | | | | | | |
| |) N.E. 199TH STREET #204 | | 82 Street A | Address (P.O. Box Number is Not Acce | ptable) | |
| NO | RTH MIAMI FL 33179 | | | | | |
| | | | 83 | | | |
| | | | 84 City | | 85 Zip | Code |
| | | 00 - 1007 1500 Pt. 11 8 | | | FL ["] | 7 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, to ove-named corporation submits this statement for the purpose of changing its registered 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 | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Reg. Agent algorature required when reinstating) OATE | | | | | | |
| 12. | | ND DIRECTORS | | ADDITIONS/CHANGES TO O | FFICERS AND DIRECTO | PRS IN 12 |
| TITLE | PTSD | DELETE | Ε | • | Change | |
| NAME | BENSCH, C S | ** | ME | PIEN NULL TRTH | -T | 2 |
| STREET ADDRESS | 3801 SOUTH OCEAN DRIVI | E #3K | 1 LEET ADDRESS | 8620,400 (10) | 312015 | أأ |
| CITY-ST-ZIP | HOLLYWOOD FL 33019 | | 1 Y-ST-ZIP | minmitc | .360,3 | & |
| TITLE | V | VX DETELE | 2.1 LE | 8650 NW 1787H MIN-M 1 FC 8650 NW 178TH MNAM 1 FZ, | Change | Addition C |
| NAME | QUINTON, MICHAEL | | 2.2 ME | 860 NW 178 14 | SI | |
| STREET ADDRESS | 3801 SOUTH OCEAN DRIVI | E #3K | 2.3 REET ADDRESS | las mars 1 FT | 33015. | |
| CITY-ST-ZIP | HOLLYWOOD FL 33019 | | 2.4 TY-ST-ZIP | VVIVI VIET LET | - 500. | |
| TITLE | | ☐ DELETE | 3.1 LE | | L Change | Addition |
| NAME | | | 3.2 I M€ | | | |
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| NAME | | i | 4. 2 NAME | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP TITLE | - | ☐ DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | | Change | Addition |
| NAME | | Deterio | 5.2 NAME | | | _ |
| STREET ADDRESS | | 1 | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 6.1 TITLE | | Change | Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | İ | 6.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | | 1 |
| | ertify that the information supplied | with this filing does not qualify for the | | d in Section 119.07(3)(i), Florida Statut | es. I further certify that th | e information |

annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a ver or truetce empowered to execute this report as required by Chapter 607, Fjorida Statutes; and that my name appears in