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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000090906 (5)

KEITH A. JAMES, ESQ., P.A.

## **FILED** May 20 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address						
1655 PALM BEACH LAKES BOULEVARD SUITE 810. TOWER C WEST PALM BEACH FL 33401 US		1655 PALM BEACH LAKES BOULEVARD SUITE 810. TOWER C WEST PALM BEACH FL 33401 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
						11/27/1995		
	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21 5725	Corporate Way	26 5725 Corpo	rate	Way	ł	65-0632827		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional
22 Suit	e_106	27 Suite 106				5. Certificate of Status Desired	Fee	Required
City & Stat		City & State				6. Election Campaign Financing	\$5.0	O May Be
23 West	Palm Beach, FL	28 West Palm 1	Beac	h. FI		Trust Fund Contribution		d to Fees
Zip	Country	Zφ	Count	У		8. This corporation owes or has p	aid the current year	Intangible
24 3340		29 33407 3	0 1	JSA		Personal Property Tax due Jun		□ No
	9. Name and Address of Current	Registered Agent				<ol><li>Name and Address of New R</li></ol>	egistered Agent	
JA	MES, KEITH A		8	Name	,	-		
1655-PALM-BEACH-LAKES_BLVD_#810.				Street	Address	(P.O. Box Number is Not Accepte	ible)	
WEST-PALM BEACH FL 33401 _			Ĺ				,	
			8	3			,	
5	725 Corporate Way	, Suite 106	8	1 City			<b> 85</b> Zi	p Code
W	est Palm Beach, F	L 33407		,			FL	<u></u>
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the abo	ve-named	corporat	tion submits this statement for the	purpose of changing	ils registered
office or r agent. La	registered agout, or both, in the State o im familiar with, and accopt the obligati	i Florida, Such cha <b>nge was aut</b> ons of Section 607. <b>0505</b> , Florid	inorized i da Statute	by the corp es.	rporation	s board of directors. I hereby acce	ept the appointment a	as registered
SIGNATURE	, ,	,						Ì
SIGNATORIC	Signature, typed or prieted name of regelered again	and the if applicable (NOTE F	registered A	gent signature	e required w	nen reinstaling)	DATŁ	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF		
TITLE	PD	L_ DELETE	1.1 TITL€				<b>XX</b> Change	Addition
NAME	KEITH A. JAMES, ESQ.		1.2 NAME		1			
STREET ADDRESS	-1655 PALM-BEACH-LAKES BL	VD- #810 -	1.3 STREE	T ADDRESS	5725	Corporate Way	, Suite 10	06
CITY-ST-ZIP	-WEST PALM-BEACH-FL -		1.4 CITY-	ST-ZIP	West	Palm Beach, Fl	33407	
TITLE		☐ DELETE	2.1 TITLE				Change	e 🔲 Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	T ADDRESS	1			j.
CITY-ST-ZIP	_				1			
TITLE			2. 4 CITY	ST · ZIP				
		☐ DELETÉ	2. 4 City 3.1 Title	- ST - <b>2</b> (P			Change	e
NAME		☐ DELETE		.,		-	Change	e Addition
STREET ADDRESS		☐ DELETE	3.1 TITLE 3.2 NAME	.,		-	Change	e Addition
		☐ DECETÉ	3.1 TITLE 3.2 NAME	T ADDRESS			Change	e Addition
STREET ADDRESS		☐ DELETÉ	3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS			☐ Change	
STREET ADDRESS CITY-ST-ZIP			3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY	1 AODRESS St-Zip				
STREET ADDRESS CITY-ST-ZIP TITLE			3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY 4.1 TITLE 4. 2 NAME	1 AODRESS St-Zip				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY 4.1 TITLE 4. 2 NAME	T ADDRESS ST-ZIP T ADDRESS				
STREET ADDRESS CITY-ST-ZIP TITLE NAME			3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY 4.1 TITLE 4. 2 NAME 4.3 STREE	T ADDRESS ST-ZIP T ADDRESS				e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY	T ADDRESS ST- ZIP T ADDRESS ST- ZIP			] Change	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP			] Change	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE	T ADDRESS -SI-ZIP			] Change	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME	T ADDRESS -SI-ZIP			] Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE TADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 6.1 TITLE	T ADDRESS -S1-ZIP			Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 6.1 TITLE 6.2 NAME	T ADDRESS -S1-ZIP			Change	Addition

Keith A. James

4/29/98

is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information an report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in

(561) 686-4500