## 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

OCUMENT # **P95000091944 (5)** 

## FILED Jan 20 1998 8:00am Secretary of State

PREDATOR HOLDINGS, INC.					
Principal Place	of Business	Mailing Address		<u>-</u> {             1.000/460/ 200 1840/ 84/4/ 84/4/ 84/4/ 80/4/ 84/4/	1818: 118:10 :81:11 BIBIS BIBI 1881
325 BONTONA AVENUE 325 BONTONA AVENUE					
FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301			301	DO NOT WOLTE IN THE	0.00405
				DO NOT WRITE IN THI  3. Date Incorporated or Qualified	S SPACE
				11/30/1995	
9 Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26		h ~		65-0635576	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22 27			5. Certificate of Status Desired	Fee Required	
City & State City & State		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23 28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	9. Name and Address of Currer		30	Personal Property Tax due June 30.  10. Name and Address of New Registere	
		it nagistereo Agent	81 Name	10. (1011)0 0110 1101	
SCHECHTER, JEROME R 315 S.E. 7TH STREET					
FIRST FLOOR			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
FORT LAUDERDALE FL 33301			83		•
	III Brobertonde l'E 00001		24 6		ar Zin Codo
			84 City	F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized 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 Statutes.					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of Section 607.0505. Florida Statutes.					
SIGNATURE					
	Signature, typed or printed name of registered ag-		Registered Agent signature requir		
12.		D DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	D Salsburg, William	C Deceie	1.1 HILE 1.2 NAME		
NAME PERSON ABORDED	325 BONTONA AVENUE		1.3 STREET ADDRESS		
STREET ADDRESS	FORT LAUDERDALE FL 3330	11	1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	SALSBURG, PAUL		2.2 NAME		
STREET ADDRESS	325 BONTONA AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 3330	H	2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3 4. CITY - ST - ZIP		☐ Change ☐ Addition
TITLE		☐ DETERE	4.1 TITLE		C change C Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addition
NAME		<u> </u>	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-S1-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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 control on 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 changed, or on an attachment with an address.

ICHATURE MILL SURLING PAUL SALSBU

1-8-98 9549217144