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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 22 1998 8:00am Secretary of State

DOCU	MENT # P950	000948	399 (8)	)			
	CLIMBING SERVICE, INC		` '				
IVIAUI	OCHAIDHAG OCHAIOC, HAC	•					
Principal Plac	ce of Business	Mailing	Address				
	AN BLVD. #115	_	OCEAN BLVD.	4115			
	ALE FL 33308		IDERDALE FL 333				
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	_
3 Principal C	Place of Business	L 0 \$4-10	mm Address			12/12/1995	
21 Francipal F	race of Business	<u> </u>	ng Address			4. FEI Number Applied For	
Suite, Apt.	# etc.	26 Suite	Suite, Apt. #, etc.			65-0626598 Not Applicab	le_
22	.,	<u> </u>	27			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & Stat	e		City & State			6. Election Campaign Financing \$5.00 May Be	$\dashv$
23		28	— ·			Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Country	/	8. This corporation owes or has paid the current year Intangible	┪
24	25	29		30		Personal Property Tax due June 30.  Yes No	
	9. Name and Address of Cui	rent Registered	Agent			10. Name and Address of New Registered Agent	
KLING, TOMMY				81	Name		
3909 N OCEAN BLVD, #115				82	82 Street Address (P.O. Box Number is Not Acceptable)		-
FT LAUDERDALE FL 33308						· · · · · · · · · · · · · · · · · · ·	
				83			- 1
				84	City	85 Zip Code	ᅱ
						<b>}− L</b>	
office or a	to the provisions of Sections 607.1 registered agent, or both, in the St	2502 and 607.150 ate of Florida, Sud	DB, Florida Statul ch change was	tes, the above authorized by	e-named con the corpora	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	t
SIGNATURE	in animal with, and accept the or	ingations of, secti	10(1 007.0005, F)	orioa statute:	<b>&gt;.</b>		
	Signature, typed or printed name of registered				nt signature requ	lred when reinstating) DATE	•
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\Box$
TITLE	P VINC TOMAY		DELETE	1.1 TITLE		Li Change	D
NAME	KLING, TOMMY 3909 N OCEAN BLVD, #1	IE		1.2 NAME			
STREET ADDRESS	FT LAUDERDALE FL 33308		1,3 STREET				
CITY-ST-ZIP TITLE	FI DAODENDALE FL 33300		DELETE	1.4 CITY - S	T-ZIP		_
NAME			☐ DEFEIE	2.1 TITLE		Change Additio	n
STREET ADDRESS				2.2 NAME	4808500		
				2.3 STREET		€ 2	Ì
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY - S 3.1 TITLE	51 - ZIP	☐ Change ☐ Additio	$\exists$
NAME				3.2 NAME		Onlings Addition	1
STREET AODRESS				3.3 STREET	ADDRESS		
CITY-ST-ZIP				3.4. CITY - S			
TITLE	VIII		DELETE	4.1 TITLE	1-21	Change Addition	$\exists$
NAME				4, 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS		-
CITY-ST-ZIP				4.4 CITY - S			-
TITLE			DELETE	5.1 TITLE		Change Addition	7
NAME				5.2 NAME		·· -	
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP				5.4 CITY-ST			
TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	6,1 TITLE		Change Addition	Π
NAME				6.2 NAME	ŀ		1
STREET ADDRESS				6.3 STREET	ADDRESS		
CITY-ST-ZIP	ortifu that the information augustics			6.4 CITY-ST	- ZIP		
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nereby 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 changed, or on an attachment with an address.