

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

FILED
Jan 30 1998 8:00am
Secretary of State

DOCUMENT # P95000094977 (2)

1. Corporation Name

ABSOLUTE HOLDINGS OF SOUTH FLORIDA, INC.

Principal Place of Business

C/O COLONY REALTY, INC.
11440 OKEECHOBEE BLVD., STE. 206
ROYAL PALM BEACH FL 33411

Mailing Address

C/O COLONY REALTY, INC.
11440 OKEECHOBEE BLVD., STE. 206
ROYAL PALM BEACH FL 33411

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1995

4. FEI Number

65-0629231

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 c/o William E. Wright

26 c/o William E. Wright

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 13500 Chelmsford St.

27 13500 Chelmsford St.

City & State

City & State

23 Wellington, Florida

28 Wellington, Florida

Zip

Country

Zip

Country

24 33414

25 Palm Beach

29 33414

30 Palm Beach

9. Name and Address of Current Registered Agent

WRIGHT, WILLIAM
13500 CHELMSFORD STREET
WELLINGTON FL 33411

10. Name and Address of New Registered Agent

81 Name

same

82 Street Address (P.O. Box Number is Not Acceptable)

same

83

84 City

FL

85 Zip Code
33414

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME WRIGHT, WILLIAM
STREET ADDRESS 13500 CHELMSFORD STREET
CITY-ST-ZIP WELLINGTON FL 33414

TITLE P ☐ DELETE

NAME ELLIOTT, RICHARD
STREET ADDRESS 13150 DOUBLETREE CIRCLE
CITY-ST-ZIP WELLINGTON FL 33414

TITLE S ☐ DELETE

NAME ROBERGE, KERRY
STREET ADDRESS 13500 CHELMSFORD STREET
CITY-ST-ZIP WELLINGTON FL 33414

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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)(f), 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.

SIGNATURE:

William E. Wright

1/14/98

561-793-4466

CR2E034 (10/97)