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 May 07 1998 8:00am Secretary of State

1	MENT # P95000 SECURITIES & RESEARCH	0095938 (3) , INC.)		1841 8 /04 15018 1000 184 1861
Principal Plac	o of Business	Mailing Address			
,		4.			
310 EAST ATLNATIC AVENUE DELRAY BEACH FL 33483		310 EAST ATLNATIC AVENUE Delray Beach FL 33483		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				12/19/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0629744	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	_ · · · · ·
24	25	29	30	Personal Property Tax due June 30.	Yes □ No
	9, Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New Registere	O Agent
MURPHY, JOHN M			TVarie		
	EAST ATLNATIC AVENUE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
DEI	LRAY BEACH FL 33483		83		<u></u>
			84 City	F	85 Zip Code
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: Which is provided agent agent agent agent agent agent agent agent if agent agent agent is agent age					
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TOLE		Change Addition
NAME	MURPHY, JOHN M		1.2 NAME		
STREET ADDRESS	310 EAST ATLNATIC AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33483		1.4 CITY - ST - ZIP		
TITLE	M	☐ DELETE	2.1 TITLE		Change Addition
NAME	COLOMBO, DOUGLAS		2.2 NAME		
STREET ADDRESS	310 EAST ATLNATIC AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33483	T oc. Fte	2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-\$1-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TILE		☐ Change ☐ Addition
NAME		- Descrit	4.2 NAME		— orango — reaccon
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TIFLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREFT ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - S1 - ZIP		
14. I hereby o	ertify that the information supplied w	ith this filing does not qualify	for the exemption stated in	Section 119.07(3)(i), Florida Statutes, I further	certify that the information

and accurate and that my signature shall have the same legal effect as if made under oath; that I am an wored to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ss.