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

DOCUMENT # P96000002172 (0)

ONE-07 CORPORATION, INC.

Principal Place of Business Mailing Address 500 AUSTRALIAN AVENUE. SOUTH 500 AUSTRALIAN AVENUE. SOUTH SUITE 705 SUITE 705 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401

FILED Feb 03 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified

					01/02/1996	
2. Principal Place of Business 2a. N			Mailing Address		4. FEI Number 65-0728595	Applied For
<u> </u>		26	26		APPLIED FOR	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. 6	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 4	Country 25	Ζφ 29	Country 30		This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Intangible Yes No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
HARRELL, HARRY C			- [8	81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		
500 AUSTRALIAN AVENUE, SOUTH SUITE 705 WEST PALM BEACH FL 33401			[8			
			[6	3		
e e y	24		8	4 City	FL	85 Zip Code
11. Pursuant to	the provisions of Sections 607 t	0502 and 607.1508, Flor	ida Statules, the abo	ve-named cor	poration 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, it hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signalure, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change ___ Addition HARRELL, HARRY C 1.2 NAME 500 AUSTRALIAN AVENUE, SOUTH, SUITE 705 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP 1.4 CITY-ST-ZIP D DELETE Change Addition TITLE 2.1 TITLE LEWIS, HERBERT A NAME 2.2 NAME 500 AUSTRALIAN AVENUE, SOUTH, SUITE 705 STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP 2. 4 CITY+ST-ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 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.

1/12/00

X/1 22 -- 2011