## 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 #

## **FILED** Apr 02 1998 8:00am Secretary of State

WACHI	HOLDER AND STREIMER, I	P.A.				
Principal Plac	ce of Business	Mailing Address			a santan sia ihma pirit anni natit Antit Antit Antit (1911 Dinnt Stiff (1911 1941	
7501 NW 4 S		7501 NW 4 STREET				
PLANTATION FL 33317		PLANTATION FL 33317			DO NOT WRITE IN THE ONACE	
					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
					i '	
2. Principal F	Place of Business	2a. Mailing Address			01/09/1996 4. FEI Number   Applied For	
21		26			4. FEI Number Applied For Not Applied For Not Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CQ 75 Additional	
22		27			5. Certificate of Status Desired 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 current year Intangible	
24	25	29	30		Personal Property Tax due June 30.  Yes X No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent	
WA	ACHHOLDER, BARRY L		81	Name	ne	
	01 NW 4 STREET		82	Street	et Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33317				0001	of Address (F.O. Dox Mainbeil is Not Acceptable)	
			83			
			84	City	<b>■■ 85</b> Zip Code	
					<b>►L</b>	
l office or r	to the provisions of Sections 607.05 registered agont, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change was a	authorized by	/ the con	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered ag	and and title if anylogists of the base	E. Dan stand And		ure required when reinstating) DATE	
12.	···	ND DIRECTORS	13.	, aignature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	DELETE	1.1 TITLE		Change Addition	
NAME	WACHHOLDER, BARRY L		1.2 NAME			
STREET ADDRESS	7501 NW 4 STREET		13 STREET ADDRESS		s	
CITY-ST-ZIP	PLANTATION FL 33317			T- ZIP		
TITLE	D	DELETE	21 TITLE		Change Addition	
NAME	GARCIA, ROMONA		22 NAME		GATCIA RAMONA	
STREET ADDRESS	7501 N.W. 4TH STREET		2.3 STREET	ADDRESS		
CITY-ST-ZIP	PLANTATION FL		2. 4 CITY - 9	ST - ZIP		
TITLE		DELETE	3.1 TITLE		VSD ☐ Change ▼Addition	
NAME			3.2 NAME		STREIMER, LAURA A 7501 NW 4th Street	
STREE1 ADDRESS			3.3 STREET	ADDRESS	17501 NW 4th Street	
CITY-S1-ZIP			3.4. CITY- S	ST - ZIP	Plantation FL 33317	
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS	3	
CITY-ST-ZIP			4.4 CITY - S	T - <b>7</b> IP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST	T- ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			64 CITY-ST	T-71P		

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 roceiver 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.