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

FILED Feb 24 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State

•	1998	A ILEA	DIVISION OF	CORPORAT	IONS	Secretary \		.acc
1. Corporation	MENT # P9600 LA OF WEST BOCA, INC.	00069	79 (4)	j	114.11		ulā anna jāra lāj	2 14 421 124 1
								AND (AN) (AN) And (An)
Principal Place of Business Mailing Address						4 LOGISON: sim totife Milit adeit Mill mutet maite No	(18 Bisin 1911) 186) (B 1611 1881
6861 SW 18 S 145 SE MIZNE BOCA RATON	R BLVD	145 SE	C/O Janover Rubinroit 145 Se mi z ner blyd Boca Raton Fl 33432			DO NOT WRITE IN THIS	SPACE	
U\$	7 C 50 100	000111	mion 12 00102			3. Date Incorporated or Qualified		
				·····		01/22/1996		
<u> </u>	lace of Business	⊢ -₁	2a, Mailing Address			4. FEI Number	⊢	pplied For
Suite, Apt	#. etc.	26 Suite	Suite, Apl. #, etc.			65-0642214		ot Applicable Additional
22	., -,-	27				5. Certificate of Status Desired		equired
City & State	•	City &	Stato		,	6, Election Campaign Financing	\$5.00	May Be
23		28		1 0		Trust Fund Contribution		to Fees
Zip	Country	Zip		Counti	ry	 This corporation owes or has paid the corporation of the Personal Property Tax due June 30. 		tangible ☐ No
24	25 9. Name and Address of Curr	[29] rent Registered	Agent	30		10. Name and Address of New Registered		<u></u>
LUF	BITZ, CHARLES A			8	Name			
515 N FLAGLER DRIVE 17TH FLOOR					2 Street Add	dress (P.O. Box Number is Not Acceptable)		
WEST PALM BEACH FL 33401					<u> </u>			
				83	3.			
				84	4 City	F	85 Zip	Code
44 Parement	to the provisions of Sections 607.0	141 703 and 607 140	Q Florida Statu	tes the abov	ve named cor			te registered
office or re	egistered agent, or both, in the Sta	ate of Florida Sur Footbase of Foot	ch change was	authorized t	by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE						uired when reinstating) DATE		
12.	Signature, typed or ported name of registered OFFICERS A	ND DIRECTORS		13.	gent signature requ	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	0	<u> </u>	DELETE	1.1 TITLE			Change	☐ Addition
NAME	VIOLA, LINO			1.2 NAME	E .			1
STREET ADDRESS	73 PROSPECT AVE			1.3 STREE	ET ADDRESS			
CITY-ST-ZIP	CEDARHURST NY 11516		Priese	1.4 CITY-				1 Continue
TITLE	D CURLION MONA T		DELETE	2.1 TITLE	1		Change	Addition
NAME STREET ADDRESS	EHRLICH, MONA T 65 ROOSEVELT AVE			2.2 NAME	ET ADDRESS			
CITY-SI-ZIP	VALLEY STREAM NY 11581	1		2.4 CITY	1			
TITLE	THE STILL WITH THE		DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3 3 STAEE	ET ADDRESS			Ì
CITY-ST-ZIP				3.4. CITY	-ST-ZiP		~~ ~~	
TITLE			DELETE	4.1 TITLE	_		L Change	Addition
NAME				4. 2 NAMI				
STREET ADDRESS					F1 ADDRESS			
CITY-ST-ZIP TITLE			DELETE	4.4 CITY- 5.1 TAILE			Change	Addition
NAME			-	5.2 NAME				_
STREET ADDRESS				5.3 STREE	ET ADDRESS			1
CITY-ST-ZIP				5.4 CiTY-	ST-ZIP			
TITLE			DELETE	61 TITLE		.	☐ Change	☐ Addition
NAME				6.2 NAME				
STREET ADDRESS				8	ET ADORESS			
14. I hereby C	ertify that the information supplied	with this filmo d	oes not qualify f	6.4 City- or the exem		n Section 119.07(3)(i), Florida Statutes, I further of	ertify that the	information
Indicated of officer or o	on this annual report or supplemen	ntaf annual repor eceiver or trustee	t is true and acc empowered to	curate and th	hat my signat	ure shall have the same legal effect as if made u quired by Chapter 607, Florida Statutes; and that	nder oath: tha	atlam an Í
2.00m 12 t				1 11 .				1