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

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600009850 (4)

ALAN FISHMAN & ASSOCIATES, P.A.

FILED Apr 14 1998 8:00am Secretary of State

Principal Plac	e of Business	Maiting	Address				-	88111 40 112 12121 18181	01111 80 41 1001
2301 W. SAMPLE RD.			2301 W. SAMPLE RD						
BLGD. 3. STE. 3A POMPANO BEACH FL 33073			BLDG. 3. STE. 3A POMPANO BEACH FL 33073						
							DO NOT WRITE IN THIS SPACE		
US		U\$					3. Date Incorporated or Qualified		
Dringing D	lace of Business	Lan Mail	ling Address		—		01/31/1996 4. FE! Number		nnlind For
—	Tace of Business	h	ing Address						pplied For lot Applicable
Suite, Apt.	# ptc	26 Suit	e, Apt. #, etc.				65-0637001	\$9.75	Additional
22	<i>n</i> , 0(0.	27	5, 14x. 11 cx 5.				Certificate of Status Desired	,	Required
City & Stat	е		& State				6. Election Campaign Financing	\$5.00	May Be
23		28							to Fees
Zip	Country	Zιp		Cour	itry		8. This corporation owes or has paid t	the current year In	ntangible
24	25	29		30			Personal Property Tax due June 30		□No
	9. Name and Address of Curre	nt Registered	Agent				10. Name and Address of New Regis	tered Agent	·
F	ISHMAN, ALAN			· ·	B1	Name			
	301 W. SAMPLE RD.				82	Street Addre	ss (P.O. Box Number is Not Acceptable)	······································	
	LDG. 3, STE. 3A OMPANO BEACH FL 33073				83				
					84	City		85 Zip	Code
44.5	and the second s		on Flatte Rich	des the sh		nemad serve	pration submits this statement for the purp	FL	ita registerad
office or r	egistered agent, or both, in the State	of Horida, Si	uch change was	authorized	by	the corporation	on all of the purple of the pu	he appointment as	s registered
agent la	m familiar with, and accept the oblig	ations of, Sec	tion 607.0505, f	Iorida Statu	ites				
SIGNATURE	Signature, typed or printed name of rejectored ap-	ent and this Percel		11 Floristured	 Acon	nt signature requires	dud on seinstaland	DATE	
12.	OFFICERS AN			T 13.	- Gri	in signati e regor e	ADDITIONS/CHANGES TO OFFICER	·	RS IN 12
TITLE	D		DELETE	1.1 1111	.E			☐ Change	Addition
NAME	FISHMAN, ALAN S			1.2 NA!	ИE				
STREET ADDRESS	2301 W. SAMPLE RD., BLD	G. 3, STE. 3	3A	1.3 \$16	EET.	ADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL			1.4 CIT	y - S1	I - ZIP			
TITLE			DELFTE	2.1 TH	E			☐ Change	☐ Addition
NAME				2.2 NAI	ΛE				
STREET ADDRESS				2.3 \$16	EE1.	ADDRESS			
CITY-ST-ZIP				2 4 01	Y - S	1 - ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE			DELFTE	3.1 TIT	E	1		L Change	Addition
NAME				3.2 NA					
STREET ADDRESS				3.3 STF	££1.	ADDRESS			
CITY-\$T-ZIP			··· The substitute is	3.4. CIT		1-ZIP		06	T Addition
TITLE			∐ DELETE	4.1 TH				☐ Change	Addition
NAME				4. 2 NA					
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			DOLLAR	4.4 C(T		T- Z(P		☐ Change	Addition
TITLE			☐ DELETE	5.1 TITI		ļ		□ crange	- Addition
NAME				5.2 NAI		ADDDECC			
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			☐ DELET E	5.4 CIT 6 1 TITI		1 - ZIP		Change	Addition
•			L. Deterie	6.2 NA				change	Land Floation
NAME CERTE ADDOCCO						ADDRECC			
STREET ADDRESS				6.3 S1F		ADDRESS			

14. I horeby 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.

CIONATURE.

Mlant Falman

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054-075-7800