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 Mar 13 1998 8:00am Secretary of State

1. Corporati	IMENT on Name JECT 21,		000011	558 (9	9)			
Principal Place of Business Mailing Address							T LEGITIONS INC. LEGITS BUILT DON'T BOTH DON'T DON'T	
198 N.W. 108TH AVENUE 198 N.W. 108TH AVENU					NUE			
CORAL SPRINGS FL 33071				CORAL SPRINGS FL 33071			DO NOT INDITE IN THIS	00405
							DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
							02/06/1996	
2, Principal Place of Business 2a, Mailing Address							4. FEI Number	Applied For
21 2				6			65-0639665	Not Applicable
Suite, Apt	. #, etc.		Suit	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 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 9. Name and Address of Current Registered Agent					30		Personal Property Tax due June 30. 10, Name and Address of New Registered	Yes No
						Name	10, Name and Pauloss of New Hogistered	Agont
FILINGS, INC. 3732 N.W. 18TH STREET								
FORT LAUDERDALE FL 33311					82	Street Add	dress (P.O. Box Number is Not Acceptable)	
TOTT ENOUGHDALE TE 33311					83			
					B4	City	FL	85 Zip Code
11, Pursuant	to the provis	ions of Sections 60	7.0502 and 607.15	08, Florida Statu	ites, the abov	e-named cor	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	changing its registered
agent. I a	am familiar w	th, and accept the	obligations of, Sec	tion 607.0505, F	lorida Statute	y ine corpora s.	ation's board or directors. I hereby accept the app	ointment as registered
SIGNATURE								
	Signature, typed	or printed name of registe	od agent and title if appli S AND DIRECTOR			ent signature requ	lired when reinstating) DATE	
12. TITLE	<u> </u>	OFFICER	S AND DIRECTOR	DELETE	13. 1.1 TiTLE		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12 Change
NAME					1.2 NAME			Cuante
STREET ADDRESS	HF		1.3 STREET ADDRESS					
STREET ADDRESS 198 N.W. 108TH AVENUE CORAL SPRINGS FL 33071				1.4 CITY - ST - 3				
TITLE				DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME					2.2 NAME			
STREET ADDRESS	}		*		2.3 STREET	ADDRESS		
CITY-ST-ZIP					2. 4 CITY - ST - ZIP			
TITLE				DELETE	3.1 TITLE			Change Addition
NAME					3.2 NAME			į
STREET ADDRESS					3.3 STREET	address		
CITY-ST-ZIP	- 				3.4. CITY - 5	T-21P		
TITLE				DELETE	4.1 TITLE]		☐ Change ☐ Addition
NAME OTRECT LEADERS					4. 2 NAME	1		
STREET ADDRESS					4.3 STREET			1
CITY-ST-ZIP				DELETE	4.4 CITY - S	T- ŽIP		
TITLE NAME					5.1 TITLE			☐ Change ☐ Addition
STREET ADDRESS					5.2 NAME	ADDRESS		
CITY-ST-ZIP					5.3 STREET			
TITLE				DELETE	5.4 CITY-S' 6.1 TITLE	1-411		Change Addition
NAME					6.2 NAME			Stange Addition
STREET ADDRESS					6.3 STREET	ADDRESS		
CITY-ST-ZIP					6.4 CiTY - S	i		
	certify that the	e information supplie	ed with this filing d	oes not qualify f			Section 119 07/3VI) Florida Statutes I further con	tify 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 point allaction and accurate and that my name appears in