## 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 # P96000026381 (9)

GAIL K. EHLIN, N.P., P.A.

FILED Feb 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									r endringer rin i brita merri muser mutis musta teffe mitat beint beint fifth infit		
5310 N.W. 33RD AVENUE				5310 N.W. 33RD AVENUE							
#110			#110						DO NOT IMPLIE AND NO OF A OF		
FT. LAUDERDALE FL 33309				FT. LAUDERDALE FL 33309					DO NOT WRITE IN THIS SPACE		
									3. Date Incorporated or Qualified 03/26/1996		
2. Principal Place of Business				26. Mailing Address					4. FEI Number Applied For		
Suite, Apt. #, etc.				26 Cuito Ant # oto					<b>65-0655080</b> Not Applicable		
22				Suite, Apt #, etc.					5. Certificate of Status Desired \$8.75 Additional		
City & State			27	City & State					Fee Required		
23			20	)					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country			28	Zip Country			,				
24	25			9 30			,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No		
9. Name and Address of Current									10. Name and Address of New Registered Agent		
SE	RCHAY, AL					81	Nar	ne			
	10 N.W. 33					82	2 Chant Adalas		(0.0 P. H. )		
#110							Stre	Strect Address (P.O. Box Number is Not Acceptable)			
FT.	LAUDERD	ALE FL 33309				В3	<del>                                     </del>				
						84	City	,	FL 85 Zip Code		
11. Pursuant	to the provis	ions of Sections 607.050	2 and 6	07.1508, Florida Statu	tes, the a	bove	i e-nam	ed corpo	poration authority this atetempert for the purpose of character it.		
onice or r	regi <b>s</b> (erea ag	gont, <b>or b</b> oth, in the State ith, <b>and accept the o</b> bliga	of Flori	da. Such change was i	authorize	d by	z the d	corporatio	ion's board of directors. I hereby accept the appointment as registered		
SIGNATURE											
						d Ago	nnt signa	sture required	ed when reinstating) DATE		
12.	. <u>nn</u>	OFFICERS AND	DIREC		13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	ĊAII I∕		☐ DELETE	1111			}	Change Addition		
NAME	EALIN, (				12 N	AME					
STREET ADDRESS 1668 CYPRESS POINT DRIVE CORAL SPRINGS FL							AODRES	SS			
CITY-ST-ZIP TITLE	CONAL	OFFIITUO FL		DELETE			T-7(P				
				C DETERE	2.1 Tr				Change L Addition		
NAME					2.2 N/						
STREET ADDRESS							ADDRES	SS			
CITY-ST-ZIP TITLE				DILETE	2.4 C		ST-ZIP		C Access I delicerate		
NAME				L.J OLICIL	3.1 TI 3.2 N/				Change Addilion		
STREET ADDRESS							ADDOLG	e l	,		
CITY-ST-ZIP							ADDRES	53			
TITLE		······································		DELETE	3.4. C		91 - £1P'		Change Addition		
NAME					4.2 N				Culange C Addition		
STREET ADDRESS							ADDRES	:c			
CITY-ST-ZIP					4.4 CI			~			
TITLE			<del></del> -	DELETE	5.1 Til		1 - 211	<del> </del> -	Change Addition		
NAME					5.2 NA				_ coange _ roundi		
STREET ADDRESS							ADDRES	s			
CITY-\$T-ZIP					5.4 CI						
TITLE				DELETE	6.1 1/1			<del></del> -	Change Addition		
NAME					6.2 NA						
STREET ADDRESS					ı		ADORES	s			
CITY-ST-ZIP					6.4 Ci1						

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.

DAIL BALL

inglav