## 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 # P96000029214 (9)

BRAD LIPSHAW & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

## FILED Apr 17 1998 8:00am Secretary of State



	ARDENS DR #106 BEACH FL 33414	2075 POLO GARDENS DR ( WEST PALM BEACH FL 334		DO NOT WRITE IN THI	S SPACE
				<ol> <li>Date Incorporated or Qualified</li> <li>03/28/1996</li> </ol>	
2. Principal Place of Business 2a. Mailing Address 2b. 14311 FURA LANE 2b. 14311 FURA LAN				4. FEI Number	Applied For
21 /43/	1 FLORA LAI		KA LAN	65-0657123	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	LINGTON, FL	· 28 WELLING		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 70161	Country	Zip	Country	8. This corporation owes or has paid the o	
24 3341	4  25   / ) H	29  334/4  3	0 VSA	Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
'g, Name and Address of Current Registered Agent'  LIPSHAW, BRAD  81 Name					
2075 POLO GARDENS DR #106 WEST PALM BEACH FL 33414  82 Street Address (P.O. Box Number is Not Acceptable)  48/ Street Address (P.O. Box Number is Not Acceptable)  83  84 Street Address (P.O. Box Number is Not Acceptable)					
				UELLINGTON F	L 33414
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE    Signature, typied or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)    DATE					
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	PRESIDENT LIPSHAW, BRAD 14311 FLORA LAND	Change Addition
NAME	LIPSHAW, BRAD		1.2 NAME	LIPSHAW BRIDE	
STREET ADDRESS	2075 POLO GARDENS DI		1.3 STREET ADDRESS	14311 FLORA LINO	) u f
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY - ST - ZIP	WELLENGTON FL 334	<del></del>
TITLE		☐ DELETE	2.1 TITLE	·	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	<u>.</u>	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE NAME		- Bittie	3.2 NAME		change racinon
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. City-St-ZiP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Dorott	5.4 CITY-ST-ZIP		Change Addition
TITLE		L_ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
City-St-ZiP	ertify that the information supplie	ed with this filing does not qualify for	6.4 CITY-ST-ZIP the exemption state	d 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 an altay if nent with an address.					