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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # 1. Corporation Name P96000036430 (2)

TRACK SECURITIES CORP. Principal Place of Business Mailing Address 1800 CORPORATE BLVD. 1800 CORPORATE BLVD. SUITE 303 SUITE 303 DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33431 BOCA RATON FL 33431** 3. Date Incorporated or Qualified 04/22/1996 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 65-0679512 Suite, Apt #, etc. Suite. Apt. #. etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zıp Zip 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes Yes 24 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name SPIEGELMAN, TXCK

Street Address (P.O. Box Number is Not Acceptable)

1800 COR POKATE BLUD SPIEGELMAN, JACK 980 NORTH FEDERAL HIGHWAY, SUITE 110 **BOCA RATON FL 33432** KATON BOCK 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Stalutes, 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. TACK SPICECLAND OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition TITLE DELETE 1.1 TITLE D SPICACLMAN, TACK SPIEGELMAN, JACK 1.2 NAME STE 201 1800 CORPORATE BEND STREET ADDRESS 980 NORTH FEDERAL HIGHWAY, SUITE 110 1.3 STREET ADDRESS **BOCA RATON FL 33432** BOCA RATON FL 33+31 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6.1 TITLE

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.

6.4 CITY - ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

THER SPIGELMAN, BY

**FILED** 

Mar 24 1998 8:00am

Secretary of State