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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600038081 (1)

STEVEN SHEINFELD, P.A.

## FILED Apr 27 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address  521 \$ ANDREWS AVE 521 \$ ANDREWS AVE								
SUITE 11 FT. LAUDERDA	I E 61 22201	SUITE 11 FT. LAUDERDALE FL 33301				DO NOT WRITE IN THIS SPACE		
US	ing 12 00001	US				3. Date Incorporated or Qualified 05/01/1996		
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number	Applied	For
21		26				65-0669472	Not App	olicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Addition	onal
22		27				5. Certificate of Status Desired	Fee Require	ıd
Clty & State		Cily & State			·	6. Election Campaign Financing	\$5.00 May	Be
23		28				Trust Fund Contribution	Added to Fee	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the cu	irrent year Intangib	ole
24	25	29	30			Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered	Agent	
	infeld, steven			B1	Name			
	S ANDREWS AVE		-	82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
STE								
FT L	AUDERDALE FL 33301		{	83				
			<u> </u>	84	City	FI	85 Zip Code	
44 Duramont to	the expulsions of Sections CO7 OL	00 and 007 1500 Floride Ct	atutas tha ab		comod como			in a constant
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, typed or printed name of registered agent and line if applicable (NOTE: Registered Agent signature required when reinstating)  DATE								
12.		ID DIRECTORS	13.	Agent.	aignatore requied	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN	12
TITLE	P	DELETE	1.5 TITO	.E	· · · · <u>T</u>	7.001.01.01.01.01.01.01.01.01.01.01.01.01		Addition
NAME	SHEINFELD, STEVEN		1.2 NA					];
1	STREET ADDRESS 521 S ANDREWS AVE, STE 11				UDBESS			
CITY-ST-ZIP FT LAUDERDALE FL		• •	1.3 STREET ADDRESS					
TITLE			2.1 1111		ZIF		Change	Addition
NAME				2.2 NAME				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS					DDF44			
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			3.3 STR		- 1			
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NAME								MANUAL
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STREET ADDRESS			4.3 STR					
CITY-ST-ZIP	<del></del>	DELETE	4.4 CIT		<u> </u>		Chanca	Addition
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NAME			5.2 NAM					j
STREET ADDRESS			5 a STR		- 1			]
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TITLE		☐ DELETE	6.1 TITL				Change	Addition
NAME			6.2 NA					
STREET ADDRESS			6.3 STR	REET AD	DORESS			J
CITY-ST-ZIP	Alf. Mark Al. St. St. St. St. St. St. St. St. St. St	CALL ALCO A COLOR DE	6.4 CIT			action 119 07(3)(i) Florida Statutes I further o		
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Indicated on this annual report or supplied with this hing 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empewared 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 or an attrictiment with an officer.