PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000038630 (5)

FILED Mar 31 1998 8:00am Secretary of State

	SO CIRCL	LE TRACK, INC.		ling Addrson	·	<u></u>					
Principal Plac		S		lling Address D BOX 31907							
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS F					S FL 33420	0		Do Mar Winter			
US			US	3				DO NOT WRITE	INTHIS	PACE	
								3. Date Incorporated or Qualified 04/29/1996			
2, Principal P	Place of Busin	noss	2a.	Mailing Address				4. FEI Number		T Ar	plied For
21			- 1	26			65-0675547			t Applicable	
Suite, Apt.	. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22			27		<u></u>			5. Certificate of Status Desired		Fee Re	quired
City & State	te		— <u> </u>	City & State				6. Election Campaign Financing	_	\$5.00	
23		Country	28	7 in	T	Index.		Trust Fund Contribution	. U	Added (
Zip 24	ļ	Country 25	29	Zip	30	untry		8. This corporation owes or has pa Personal Property Tax due June	_		angible] No
<u> </u>	p. Name	and Address of Curren		ered Agent	30	1	<u> </u>	10. Name and Address of New Re			7,40
HU	OFFMAN, A					81	Name			7	
1610 SOUTHERN BOULEVARD						82 Street Ad		ress (P.O. Box Number is Not Acceptal	ala)		
WEST PALM BEACH FL 33406						02	Stieet Aud	ress (F.O. Box Normber is Not Acceptal	נפות		
						83					
						84	City			85 Zip (Code
									FL		
11. Pursuant office or ragent. I a	to the provis registered ag am familiar w	ions of Sections 607.050 jent, or both, in the State th, and accept the obliga	2 and 60 of Florida ations of,	7.1508, Florida Statu a. Such change was Section 607.0505, F	tes, the a authorize lorida Sta	bove d by tutes	named corpora the corpora	poration submits this statement for the patients board of directors. I hereby acce	ourpose of pt the appo	changing it pintment as	s registered registered
SIGNATURE		, ,						*			
	Signature, typed	or printed name of registered age				d Age	ni signalure requ	red when reinstating)	DATE		
12.	D	OFFICERS ANI	D DIREC	TORS DELETE	13.			ADDITIONS/CHANGES TO OFFICE	CERS AND	DIRECTOR Change	S IN 12 Addition
TITLE	-	O, RICHARD D			1.1 TI 1.2 N		1			T Clianite	L Addition
NAME STREET ADDRESS		ULFSTREAM WAY					ADDRESS				
CITY-ST-ZIP		BEACH FL				ITY-S					
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NAME	Ì			-	2.2 N	AME	}			-	
STREET ADDRESS					235		IDDOCA				
CITY-ST-ZIP						TREES	ADDRESS)				
					1	TREET CITY - S	ſ				
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				☐ DELETE	2.4 C 3.1 Ti 3.2 N	CITY-S ITLE IAME	ſ			Change	Addition
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SIGNATURE:

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