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 # P9600038671 (9)

CAROLINE WHITE, P.A.

FILED Feb 20 1998 8:00am Secretary of State

OAHOL						
Principal Place of Business Mailing Address						
2929 E COMMERCIAL BLVD 2929 E COMMERCIAL BLVI						, and the second
FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306 US US						DO NOT WRITE IN THIS SPACE
U\$ U\$						3. Date Incorporated or Qualified
						04/29/1996
2. Principal Place of Business 2a. Mailing Address						4. FEI Number 65-067 1297 Applied For
21 26						65 0664111 Not Applicable
Suite, Apt. #, etc. Suite, Apt.			. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27				Fee Required
City & Stat	le .	 	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Z8 Country Zip			Country	 	
24	25	29	 			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Curre			<u> </u>		10. Name and Address of New Registered Agent
W	HITE, CAROLINE ESQ	 		81	Name	
BARNETT BANK TOWER #501				93	Otront Andre	Con /O O Day Niverbas is Nist Assessible)
2929 E COMMERCIAL BLVD				82	Street Addi	ress (P.O. Box Number is Not Acceptable)
FT	LAUDERDALE FL 33308			83		***************************************
				84	City	85 Zip Code
44 Ourougest	to the provisions of Sections 607.06	02 and 607 1609 Ex	rida Ctatulas	the above	named sore	FL 65 2.10 COUR
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 ag	and and title if annicable	(NOTE: D	agistared Age	ot eigesture regun	red when reinstating) DATE
12.		ND DIRECTORS	(NOIL: N	13.	in alguatore requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE		Change Addition
NAME	WHITE, CAROLINE ESQ			1.2 NAME		
STREET ADDRESS 2929 E COMMERCIAL BLVD BARN BK TR #501)1	1.3 STREET ADDRESS 1.4 CHTY-ST-ZIP		
CITY-ST-ZIP	FT LAUDERDALE FL					
TITLE			DELE TE	2.1 TITLE		Change Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET	ADDRESS	
CITY-ST-ZIP				2. 4 CITY-S	I - ZIP	·
TITLE			DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME				3.2 NAME	-	
STREET ADDRESS				3.3 STREET	ADDRESS	·
CITY-ST-ZIP				3.4. CITY-S	T-ZIP	
TITLE			DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME				4.2 NAME		
STREET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZIP			DELETÉ:	4.4 CITY-ST	T- ZIP	
TITLE		Ļ	DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADORESS				5.3 STREET	-	
CITY-ST-ZIP		······	OCI CTC	5.4 CITY - ST	I-ZIP	
TITLE		L	DELETE	6.1 TITLE	1	☐ Change ☐ Addition
NAME				6,2 NAME		
STREET ADDRESS				6.3 STREET		
CITY-ST-ZIP				6.4 CITY - ST	r- ZIP	

4. 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 minual 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 preciousness reports 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.

CIGNATURE:

2/198 0.4-112205