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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 26 1998 8:00am

Secretary of State

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000043879 (1)

IVAN GOLDBERG & ASSOCIATES, INC.

Principal Place of Business Mailing Address C/O IVAN GOLDBERG C/O IVAN GOLDBERG 244 ORANGE TREE DR 244 ORANGE TREE DR DO NOT WRITE IN THIS SPACE ATLANTIS FL 33462 ATLANTIS FL 33462 3. Date incorporated or Qualified 05/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 65-0673409 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country This corporation owes or has paid the current year intangible Yes 24 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name GOLDBERG, BARBARA C/O IVAN GOLDBERG 82 Street Address (P.O. Box Number is Not Acceptable) 244 ORANGE TREE DR 83 ATLANTIS FL 33462 City Zip Code 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 little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Ď Addition 1.1 TITLE ☐ Change NAME **GOLDBERG. IVAN** 1.2 NAME STREET ADDRESS 244 ORANGE TREE DR 1.3 STREET ADDRESS CITY-ST-ZIP ATLANTIS FL 33462 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME **GOLDBERG, BARBARA** 2.2 NAME STREET ADDRESS 244 ORANGE TREE DR 2.3 STREET ADDRESS QHY-ST-ZIP ATLANTIS FL 33462 2.4 CITY-ST-ZIP 4'SITLE □ DELETE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 City-ST-ZIP

☐ DELETE