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 #
1. Corporation Name P96000049614 (6)

FILED

Apr 20 1998 8:00am

Secretary of State

EHS IN	VESTMENTS, INC.					A STRANGER HIE SENIE EINN ETNIN BENN ETNIN ETNIN ENNIN ENRIE FENER KNIER SIGNE SIGN EINE STREN	
			·				
Principal Place of Business		Mailing Addre	Mailing Address				
	S C. WALSER, ESO		C/O THOMAS C. WALSER, ESQ.				
7015 BERACASA WAY - #201 BOCA RATON FL 33433			7015 BERACASA WAY - #201 BOCA RATON FL 33433			DO NOT WRITE IN THIS SPACE	
ı						3. Date Incorporated or Qualified	
•						06/11/1996	_
	lace of Business	<u>├</u> ──┐	2a. Mailing Address			4. FEI Number Applied For	_
Suite, Apt.	# atc		Suite, Apt #, etc.			65-0674309 Not Applicat	10
22	π, θιο.	 -¬	27			5. Certificate of Status Desired Fee Required	
City & State	э		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	28			Trust Fund Contribution Added to Fees	_
Zip	Country	Zip	· — ·		,	8. This corporation owes or has paid the current year Intangible	
24	25	29		30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	4
9, Name and Address of Current Registered Agent						10. realing Billo Address of from regulatered Agent	_
	LSER, THOMAS C			82			
	I 5 Be racasa way E #2 01				Street Add	dress (P.O. Box Number is Not Acceptable)	
	CA RATON FL 33433			83			
00	ON INTON 1 E 00400			84	City	85 Zip Code	
					,	FL	
11. Pursuant I	to the provisions of Sections 60	7.0502 and 607.1508, Flo	orida Statutes	s, the above	e-named cor	poration submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered	ď
agent. I a	m familiar with, and accept the	obligations of, Section 60	7.0505, Flor	ida Statutes	5.	and the board of an octors. This boy decopt the appointment as registered	
SIGNATURE			- DIOTE			ured when reinstating) DATE	_ }
12,	Signature, typed or printed name of register OFFICER	S AND DIRECTORS	(NOTE:	13.	eni signaturu redu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-
TITLE	PSTD		DELETE	1.1 TITLE		Change Additi	on
NAME	ENGELHARDT, FORMAN			1.2 NAME			
STREET ADDRESS	D, #309		1.3 STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY - S	IT-ZIP		
TITLE		L	DELETE	2.1 TITLE		☐ Change ☐ Additi	on
NAME			22N				
STREET ADDRESS				2.3 STREET ADDRESS			į
CITY-ST-ZIP TITLE	·	П	DELETE	2. 4 CiTY - :	ST - ZIP	☐ Change ☐ Additi	 on
NAME		U	PLEIC	3.2 NAME			.,
STREET ADDRESS				3.3 STREET	ADDRESS		
CITY-ST-ZIP				3.4. CITY-			
TITLE	1		DELETE	4.1 TITLE		☐ Change ☐ Addit	οn
NAME	``			4. 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - S	IT-ZIP		
TITLE		ليا	DELE TE	5.1 TITLE		L. Change L. Additi	JII
NAME				5 2 NAME	LODDSOG		
STREET ADDRESS				5.3 STREET	-		
CITY-ST-ZIP TITLE			DELETE	54 CITY-S 61 TITLE	01-219	☐ Change ☐ Addit	on
NAME		_		62 NAME		–	
STREET ADDRESS				63 STREET	ADDRESS		
CITY-ST-ZIP				6.4 CITY- S	31 - ZIP		
44 I boroby s	certify that the information supplied this annual report or supple	lied with this filing does n	ot qualify for	the exemp	tion stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the information ure shall have the same legal effect as if made under oath; that I am an	n
officer or Block 12	director of the corporation or the or Block 13 if changed or on a	e receiver or trustee emp n attachmen) with an add	owered to e	xecute this	report as rec	ure shall have the same legal effect as if made under oath; that I am an quired by Chapter 607, Florida Statutes; and that my name appears in	
		/////	•	_		, ,	