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 # P96000050050 (9)

Principal Place 7288 WOODM TAMARAC FL US	IONT AVE	Mailing Address 7288 WOODMNOT AVE. TAMARAC FL 33321 US		DO NOT WRITE IN THE	
A. D		To Marie Addition		06/12/1996	
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0670787	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	7 ip	Country	Trust Fund Contribution	Added to Fees
24	25	29 3	- 1	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
	9. Name and Address of Cu		1	10. Name and Address of New Register	red Agent
WALTERS, RONALD J 81 Name D				OBERT A. SAYI	h
1170 N.W. 133RD TR Sun ris e Fl 33323			82 Street Add	ress (P.O. Box Number is Not Acceptable)	-
	111102 1 2 00020		83) D WOOPING T THE	······································
1,2	,		84 City 11	marac 1	FL 85 Zip Code
11. Pursuant office or rangent. 1 (S	> De xair	L KOBERT H	the above-named corporated by the corporated a Statutes. Registered Agent signature requi	poration submits this statement for the purpos tion's board of directors. I hereby accept the	se of changing its registered appointment as registered
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	7	DELETE	1.1 TITLE		Change Addition
NAME	SAYIH, ROBERT		1.2 NAME		
STREET ADDRESS	7288 WOODMONT AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMARAC FL 33321	DELETE	1.4 CiTY - ST - ZIP		Change Addition
TITLE NAME		C DECEIE	2.1 TITLE 2.2 NAME		C Change C Audition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS	15		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 supplienced all 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 at a attrictment with an address.

FILED

May 01 1998 8:00am

Secretary of State