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 # P96000055031 (4)

CAROL A. LOUGHNANE, P.A.

Principal Place of Business

Mailing Address

FILED Apr 28 1998 8:00am Secretary of State



954-568-4404

2740 NE 28TI FORT LAUDE	h St. RDALE FL 33306	2740 NE 28TH ST. FORT LAUDERDALE FL 333	106		
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 06/27/1996	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 48/Z	NE 37th ST.	26 2812 NE 3	37th ST	65-0620167	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Çity & State	AND BRUALE FIA	City & State 28 FT LAUGERO	LALE F	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country] Zip]	Country	8. This corporation owes or has paid the cur	rrent year Intangible
24 <i>333</i>	08 25	29 3330B 3	0	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
LOUGHNANE, CAROL A 81 Name					
2740 NE 28TH ST. 82 Street Address (P.O. Box Number is Not Acceptable)					
FORT LAUDERDALE FL 33306 Aldred (B2 Street Address (P.O. Box Number is Not Acceptable) 57					
Change 3 83					
THY BA CITY LANDER CALE FL 85 Zip Code 333308					
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 talk of applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	D	7-7
NAME	LOUGHNANE, CAROL A		1.2 NAME	LoughNANE CAROLA ZB12 NE 37 th 67	_ , _
STREET ADDRESS	2740 NE 28TH ST.		1,3 STREET ADDRESS	7912 NE 37 th 67	<u></u>
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		1.4 CITY - ST - ZIP	ET INVARDANCE 1	5/A 93308
TITLE		DELETE	2.1 TITLE	1 LACON LINE THE T	Change Addition
NAME			2.2 NAME		-
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		Ì
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			4.3 STREET ADDRESS		
_CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		İ	5,2 NAME]
STREET ADDRESS			5.3 STREET ADDRESS		Į.
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		į
STREET ADDRESS			6.3 STREET ADDRESS		Ì
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby of indicated	certify that the information supplied with on this annual report or supplemental a	this filing does not qualify for t innual report is true and accur:	the exemption stated ate and that my sign	d in Section 119.07(3)(i), Florida Statutes. I further ce nature shall have the same legal effect as if made un	irtify that the information der oath; that I am an
officer or director of the corporation of 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.					