## 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 # P96000056543 (7)

BURCKHART GROUP, INC.

Principal Place of Business

Mailing Address

**FILED** May 12 1998 8:00am Secretary of State



1981 HALIFAX AVENUE MELBOURNE FL 32935			1981 HALIFAX AVENUE MELBOURNE FL 32935		DO NOT HEITS W	71 HQ 0DAOE
					DO NOT WRITE IN	THIS SPACE
]					3. Date Incorporated or Qualified	
9 Principal Class of	f Queinace	<b>6</b> Madisa Ade	droce		07/01/1996	11
2. Principal Place of Business		}ı	2a. Mailing Address		4. FEI Number	Applied For
Sulte, Apt. #, etc.			Suite, Apl. #, etc.		59:3383855	Not Applicable
22		27]	h 1		5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6, Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30	<b>,</b>	Personal Property Tax due June 30.	
9.	Name and Address of Cur	rent Registered Agent			10. Name and Address of New Regist	ered Agent
Buroki	lart, larry			81 Name		
	LIFAX AVENUE			82 Street	Address (P.O. Box Number is Not Acceptable)	
MELBOL	JRNE FL 32935			83		
				1	and the second s	
				84 City		FL 85 Zip Code
11. Pursuant to the	provisions of Sections 607.0	0502 and 607.1508, Flor	rida Statutes, the a	bove-named	corporation submits this statement for the purp poration's board of directors. I hereby accept the	<del>,</del> , , , , , , , , , , , , , , , , ,
office or register agent. I am fam	red agent, or both, in the St iliar with, and accept the of	ate of Honda. Such cha digations of, Section 60°	inge was authorize 7.0505, £lorida Stat	d by the corp lutes.	poration's board of directors. I hereby accept the	e appointment as registered
SIGNATURE	.,,	<i>y</i>				
Signatur	u, typed or parited name of registered	agent and little diapplicable	(NOTE Registere	d Agent signature	required when reinstaling)	DATE
12.	OFFICERS.	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	
TITLE P		ī	DELETE 11 Ti	TLF		☐ Change ☐ Addition €
	JRCKHART, LARRY		1.2 N	AME		12
	81 HALIFAX AVE		1.3 S	TREE1 ADDRESS		<u>خ</u> [
CITY-ST-ZIP ME	ELBOURNE FL			TY-ST-ZIP		
TITLE			DELETE 21TI	TLF		☐ Change ☐ Addition C
NAME			2.2 N	AME		
STREET ADDRESS			2.3 \$1	iree) address		
CITY-ST-ZIP				ITY-ST-ZIP		
TITLE			DELETÉ 3.1 TI	TLE		Change Addition
NAME			3.2 N/	AME		
STREET ADDRESS			3.3 \$1	FREET ADDRESS		
CITY-ST-ZIP				ITY - ST- ZIP		
TITLE		<u> </u>	DELETE 4.1 TO	TLE		Change Addition
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CITY-ST-ZIP -				TY-ST-ZIP		
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CITY-ST-ZIP				TY-ST-ZIP		
TITLE			DÉLETE 6.1 11	ILE		Change Addition
NAME			6.2 N/	AME		j
STREET ADDRESS			6.3 ST	REET ADDRESS		
CITY-ST-ZIP			6.4 C(	TY - ST - ZIP		
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indicated on this amount report or supplicemental amount 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 authority with an address.