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 # P96000059550 (9)

MARYANNE V. ORLOFF, INC.

Principal Place of Business

1155 HILLSBORO MILE #104 Mailing Address

1155 HILLSBORO MILE #104 FILED
May 21 1998 8:00am
Secretary of State



| #104 Hillsboro Beach Fl | | #104 HILLSBORO BEACH FL | | | | İ | DO NOT WRITE IN THIS SPACE | | | | | |
|---------------------------------|--|---|-------------|--|----------------------|----------------------|---|-------------------------------|-----------------------------|----------------------------|-----------------------------|--|
| | | | | | | 3 | 3. Date Incorporated or Qualified | | | | | |
| | | | | | | | 07/15/1996 | | | | | |
| | ace of Business | 2a. Marling Address P. 26 16909 Terra Imaguilla DRIVE Suite, Apt. #, etc. | | | | | تحميس الاميد. | 5-08 | 1807! | / | oplied For | |
| 21 6909 * Suite, Apt. | | | | | | | THE TOP | IUNDLE | | | ot Applicable | |
| 22 | #, 9 10. | 27 | | | | 5 | Certificate of Status | s Desired | | \$8.75 / Fee Re | Additional equired | |
| City & State | | City & State | | | | 6 | 5. Election Campaign | Financing | | \$5.00 | May Be | |
| 23 BOCK | RATONIFL | 28 BOCAKATON | | | | _ | Trust Fund Contrib | ution | | Added | | |
| Zip 224 9 | 38 25 USA | Zip Zakad | Country | | | 6 | This corporation of Personal Property | | - | | angible No | |
| 24 | 9 Name and Address of Curre | 29 20100 ent Registered Agent | 30 | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | <u> </u> | L | D. Name and Address | | | | 2110 | |
| | FLOFF, JESSICA M | ····· | | 81 | Name | 101 | 10117 | | J | T.p.p | | |
| | 221 SOUTH OCEAN BLVD | | | 82 | Street Ad | Idraec I | PO Boy Number is | Not Acceptal | hio) | | | |
| | 1006 | | | | 230 | 75 | (P.O. Box Number is | r Be | JOGE | = DE | UVE | |
| Н | IGHLAND BEACH FL 33487 | | | 83 | | | | | | | | |
| | | | | 84 | Citv | | <u> </u> | f | | 85 Zip. | Code | |
| | | | | ot | 1500 | <u> </u> | NOTAN | <u> </u> | <u> </u> | | 433 | |
| office or re | o the provisions of Sections 607.05 ogistered agent, or both, in the Stat | le of Florida. Such ch ange was . | authoriz | zed by | the corpor | orporati ration's | ion submits this state: board of directors. I | ment for the p hereby acce | ourpose of o pt the appo | changing it sintment as | ts registered registered | |
| agent. I ar | n familian with, and account the obli | gations of, Section 607.0505, F | lorida St | tatutes | 3. | | | 2 | 1/28 | 60 | - | |
| SIGNATURE | Signature Mand of product of control of the following of the | Pent and title if applicable (NO | Th. Registe | ored Age | ent signature req | ouired wh | en reinstaturo) | | 7/ <i>O</i> O/ | 70 | | |
| 12. | | ND DIRECTORS | 13 | | - it digitales of eq | 44 | ADDITIONS/CHANG | ES TO OFFI | CERS AND | DIRECTOR | RS IN 12 | |
| TITLE | D | DELETE | 1.1 | TITLE | I., | | | | | Change | Addition | |
| NAME | ORLOFF, MARYANNE V | | 1.2 | NAME | l | | | | | | | |
| STREET ADDRESS | 1155 HILLSBORO MILE | | 1.3 | S STREET | ADDRESS | | | | | | | |
| CITY-ST-ZIP | HILLSBORO BEACH FL | | 1.4 | CITY-S | T- ZIP | | | | | | | |
| TITLE | | ☐ DELETE | 2.1 | TITLE | | | | | L | Change | Addition | |
| NAME | | | 2.2 | NAME | | | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | | | |
| CITY-ST-ZIP | | DELETE | _ | 4 CITY - S I TITLE | ST-ZIP | | | | | Change | ☐ Addition | |
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| STREET ADDRESS | | | 4.3 | STREET | ADDRESS | | | | | | | |
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| NAME | | | - 1 | NAME | ADDDCCC | | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | | | |
| 14. I hereby c | ertify that the information supplied | with this filing does not qualify | | exemp | | in Sect | tion 119.07(3)(i), Flori | da Statutes. | further cer | tify that the | information | |
| indicated | on this annual report or supplement director of the opriporation or the re- | ital annual report is true and ac | curate a | and tha | at my signa: | iture sh | hall have the same led | pal effect as i | if made und | ler oath: tha | atlam an I | |
| Block 12 | or Block 13 (changed, or on an att | achment willy an address. | / | M | A A sha ni | سيارا | | / | | , up | F 240 4 11 | |