

3-19-98 B 3440 C  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000059973 (3)  
1. Corporation Name  
PAUL V. MURPHY, INC.

Principal Place of Business 5330 S.W. 8 STREET MARGATE FL 33068	Mailing Address 5330 S.W. 8 STREET MARGATE FL 33068
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/15/1996	
4. FEI Number 65-0683601		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent MURPHY, PAUL V 5330 S.W. 8 STREET MARGATE FL 33068		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	3.1 STREET ADDRESS	2.1 TITLE	2.2 NAME
CITY-ST-ZIP	3.2 STREET ADDRESS	3.1 TITLE	3.2 NAME
	3.3 STREET ADDRESS	4.1 TITLE	4.2 NAME
	3.4 CITY-ST-ZIP	5.1 TITLE	5.2 NAME
	3.5 CITY-ST-ZIP	6.1 TITLE	6.2 NAME
	3.6 CITY-ST-ZIP	7.1 TITLE	7.2 NAME
	3.7 CITY-ST-ZIP	8.1 TITLE	8.2 NAME
	3.8 CITY-ST-ZIP	9.1 TITLE	9.2 NAME
	3.9 CITY-ST-ZIP	10.1 TITLE	10.2 NAME
	3.10 CITY-ST-ZIP	11.1 TITLE	11.2 NAME
	3.11 CITY-ST-ZIP	12.1 TITLE	12.2 NAME
	3.12 CITY-ST-ZIP	13.1 TITLE	13.2 NAME
	3.13 CITY-ST-ZIP	14.1 TITLE	14.2 NAME
	3.14 CITY-ST-ZIP	15.1 TITLE	15.2 NAME
	3.15 CITY-ST-ZIP	16.1 TITLE	16.2 NAME
	3.16 CITY-ST-ZIP	17.1 TITLE	17.2 NAME
	3.17 CITY-ST-ZIP	18.1 TITLE	18.2 NAME
	3.18 CITY-ST-ZIP	19.1 TITLE	19.2 NAME
	3.19 CITY-ST-ZIP	20.1 TITLE	20.2 NAME
	3.20 CITY-ST-ZIP	21.1 TITLE	21.2 NAME
	3.21 CITY-ST-ZIP	22.1 TITLE	22.2 NAME
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	3.27 CITY-ST-ZIP	28.1 TITLE	28.2 NAME
	3.28 CITY-ST-ZIP	29.1 TITLE	29.2 NAME
	3.29 CITY-ST-ZIP	30.1 TITLE	30.2 NAME
	3.30 CITY-ST-ZIP	31.1 TITLE	31.2 NAME
	3.31 CITY-ST-ZIP	32.1 TITLE	32.2 NAME
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	3.60 CITY-ST-ZIP	61.1 TITLE	61.2 NAME
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	3.80 CITY-ST-ZIP	81.1 TITLE	81.2 NAME
	3.81 CITY-ST-ZIP	82.1 TITLE	82.2 NAME
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	3.86 CITY-ST-ZIP	87.1 TITLE	87.2 NAME
	3.87 CITY-ST-ZIP	88.1 TITLE	88.2 NAME
	3.88 CITY-ST-ZIP	89.1 TITLE	89.2 NAME
	3.89 CITY-ST-ZIP	90.1 TITLE	90.2 NAME
	3.90 CITY-ST-ZIP	91.1 TITLE	91.2 NAME
	3.91 CITY-ST-ZIP	92.1 TITLE	92.2 NAME
	3.92 CITY-ST-ZIP	93.1 TITLE	93.2 NAME
	3.93 CITY-ST-ZIP	94.1 TITLE	94.2 NAME
	3.94 CITY-ST-ZIP	95.1 TITLE	95.2 NAME
	3.95 CITY-ST-ZIP	96.1 TITLE	96.2 NAME
	3.96 CITY-ST-ZIP	97.1 TITLE	97.2 NAME
	3.97 CITY-ST-ZIP	98.1 TITLE	98.2 NAME
	3.98 CITY-ST-ZIP	99.1 TITLE	99.2 NAME
	3.99 CITY-ST-ZIP	100.1 TITLE	100.2 NAME

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 supplemental 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 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 an attachment with an address.

SIGNATURE: Paul V. Murphy Paul V. Murphy 3/13/98 954-977-8204

CR2E034 (10/97)