## 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 # P96000064797 (9)

## FILED Apr 21 1998 8:00am Secretary of State

Principal Place	ST.	Mailing Address 881 NE 30TH ST.			MI 884 1886 881 1861 1861
OAKLAND PAR	MK PL 33334	OAKLAND PARK FL 3333	<b>34</b>	DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified	
				08/02/1996	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	H ato	Suite, Apt. #, etc.		65-0094336	Not Applicable
22]	#, etc	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
	INSTON, DARRYL		81 Name		
	NE 30TH ST.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
UAJ	KLAND PARK FL 33334		63	<del></del>	- F4-4
			84 City	F	85 Zip Code
11. Pursuant !	to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	tes, the above-named cor	poration submits this statement for the purpose	of changing its registered
office or re	egistered agent, or both, in the State of tamiliar with, and accept the oblig	e of Florida, Such change was a lations of Section 607 0505. Fi	authorized by the corpora	tion's board of directors. I hereby accept the a	ppointment as registered
	The silical vital, and isocopy are cong	1110/13 01, 00011011 007.0000, 11	onda Olatotos.		
SIGNATURE	Signature typed or printed name of registered age				
		ont and bile if applicable (NOT	TF: Registered Agent signature requi	red when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ired when reinstaturg) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12. TITLE	OFFICERS AN		13. 1.1 YITLE		
12. TITLE NAME	OFFICERS AN DP JOHNSON, DARRYL	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME		ND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	DP JOHNSON, DARRYL 881 NE 30TH ST.	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		ND DIRECTORS IN 12
12. TILE NAME STREET ADDRESS CITY-SI-ZIP	DP JOHNSON, DARRYL 881 NE 30TH ST. OAKLAND PARK FL 33334	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		ND DIRECTORS IN 12 Change Addition
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14. Thereby 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 true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of businessee 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:

DARRYL JOHNSTON 11-7-98 954-797-522