## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REFORT

1998

Zip

24



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000068203 (4)

Country

9. Name and Address of Current Registered Agent

25

FT. LAUDERDALE FL 33301

LUSITG, STEPHEN 524 S. ANDREWS AVE.

STE. 101N

**LUSTIG & ASSOCIATES, P.A.** 

Principal Place of Business Mailing Address STE. 101 N. 524 S. ANDFIEWS AVE. STE. 101 N. 524 S. ANDREWS AVE. FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 26 65-0700248 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution

Zip

29

84 City Zip Code 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.

Country

81 Name

82

83

30

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE LUSTIG, STEPHEN L. NAME 1.2 NAME STE. 101 N, 524 S. ANDREWS AVE. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ... DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP **700002469947**\*\*\* -03/27/98--01004--004 DELETE TITLE 6.1 TITLE 6.2 NAME NAMÉ 6.3 STREET ADDRESS STREET ADDRESS \*\*\*150.00

CITY-ST-ZIP 14. I hereby certify that the information supplindicated on this annual report or supplied officer or director of the corporation of Block 12 or Block 13 if changed, gruy or the supplied of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information virue and accurete and that my signature shall have the same legal effect as if made under oath; that I am an impowered to execute this report as required by Chapter 607, Florida Statues; and that my name appears in

R2E034 (10/97

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

**FILED** 

Mar 26 1998 8:00am

Secretary of State

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

Street Address (P.O. Box Number is Not Acceptable)

10. Name and Address of New Registered Agent