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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P96000076175 (4)

ŸDAVIA		1140-			
Principal Place	e of Business	Mailing Address	···-··································		
4862 COCONUT ROAD SO LAKE WORTH FL 33461		4862 COCONUT ROAD S LAKE WORTH FL 33461	0	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				09/12/1996	
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number / Applied For	
21		26		65-0738046 Not Applical	alc
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required	
City & State	•	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 current year Intangible Personal Property Tax due June 30. Yes No	
24	25 9. Name and Address of Curre	nt Registered Agent	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	\dashv
	<u> </u>	int traditatored without	81 Name	ID. Italino and Addices of Note Hegistered Agent	
	RE, VAN D				
	2 COCONUT ROAD SO		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
LAK	KE WORTH FL 33461		83		
			84 City	FL 85 Zip Code	
SIGNATURE .	Van W	Dol		oration submits this statement for the purpose of changing its register ion's hoard of directors. I hereby accept the appointment as registered	3d
	1/	ent and the रे बुगुर द्वांग्रेट (NCH) ID DIRECTORS	flegistered Agent signature require	ed when reinstaling) OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	D OFFICE HS AF	DELETE	1.1 BILE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ion
NAME	WARE, VAN D	C section	1.2 NAME		
STREET ADDRESS	4862 COCONUT RD S		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL		1.4 City - St - ZiP		
TITLE	Date Holling	DELETE	2.1 TITLE	☐ Change ☐ Addit	ion
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addit	ion
NAME			3.2 NAME		-
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	☐ Chylinge ☐ Addill	ion
NAME			4. 2 NAME	M_{\star}/N_{\star}	
STREET ADDRESS			4.3 STREET ADDRESS	1/21</th <th></th>	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	10 930	
TITLE		DELETE	5.1 TITLE	Chang€ ☐ Addit	ion
NAME			5.2 NAME	1	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	160000	
TITLE		☐ DELFTE	6.1 TITLE	100002507559ange Addit -05/01/9801044031 ***150.00	on
NAME			6.2 NAME	***150 00 U1044031 -	
STREET ADDRESS			6.3 STREET ADDRESS	~~~1 OU, UU	- 1

6.4 CITY- ST- ZIP 14. I hereby certify that the information supplied with this filing does not qualify of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental arbitral report is true and accurate and that my signature shall have the same logal 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 chapter, of on an attachment with an address.