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

CORPORATION ANNUAL REPORT 1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000080282 (2) DOCUMENT #

PAUL A. BALDOVIN, JR., P.A.

Principal Place of Business Mading Address 2424 NORTH FEDERAL HIGHWAY #4025 BOCA RATON FL 33431 **BOCA RATON FL 33431**

FILED Apr 30 1998 8:00am Secretary of State



2424 NORTH FEDERAL HIGHWAY #485 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/27/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 65-0696832 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired STE Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent 81 Name PAUL A BALDWIN, JR 2424 N FEDERAL HWY, STE 406 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 City 85 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. Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE BALDOVIN, PAUL A JR NAME 1.2 NAME 2424 NORTH FEDERAL HIGHWAY #305 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33431** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS CITY ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition TITLE DELETE 41 TITLE Change NAME 4. 2 NAME

6.4 CITY-ST-ZIP CITY-ST-7IP 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADORESS

5.4 CITY - ST - ZIP

4.4 CHTY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

9/23/58 561-361-072

Change

Change

Addition

Addition