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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000083913 (9)

ALL THINGS JEWISH, INC.

FILED Jan 16 1998 8:00am Secretary of State



Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Registered Agent Personal Property Tax due June 30. Yes Number is Not Acceptable) PiCCOLO, DAVID M ESQ. 1738 45TH STREET WEST PALM BEACH FL 33407 Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Registered Agent Street Address (P.O. Box Number is Not Acceptable) Registered Agent Street Address (P.O. Box Number is Not Acceptable) Registered Agent Registered Agent Street Address (P.O. Box Number is Not Acceptable) Registered Agent Registered Agent Registered Agent Registered Agent Registered Agent Registered Agent Street Address (P.O. Box Number is Not Acceptable) Registered Agent Registered Agen	blicable bronal d Be as lle
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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 re-	
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 reoffice 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 regingent. I am familiar with, and accept the abdigations of, Section 607.0505, Florida Statutes.	erea
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE PVST DELETE 1.1 TITLE Change	Addition
NAME DAVIS, SAMUEL 1.2 NAME	
STREET ADDRESS 3151 NO MILITARY TRAIL 1.3 STREET ADDRESS	
CITY-ST-ZIP WEST PALM BEACH FL 33409 1.4 CITY-ST-ZIP	
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CITY - ST - ZIP 6.4 CITY - ST - ZIP	

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 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:

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1/9/38

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