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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT O STATE Sandra B. Mortham

**FILED** 

Apr 30 1998 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

	Corporation Namo ADMINISTRATIV	# P9000 VE ANSWERS, INC		903 (U)					
Principal Place of Business Mailing Address							t addition are enter driet meret datite oden telle deter driet stand tiet sed		
255 NW 21 ST 255 NW 21 ST									
HOMESTEAD FL 33030			HOME	HOMESTEAD FL 33030			DO NOT WRITE IN THIS SPACE		
l							3. Date Incorporated or Qualified		
							01/01/1997		
2. P	rincipal Place of Bus	2a. Mailing Address				4. FEI Number / Applied For			
21				26			65-67/1904 Not Applicable	ole	
Suite, Apt. #, etc.			<b>├</b> ──┐	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional		
22			27	· + ·			Fee Required		
23	City & State			City & State			6. Election Campaign Financing \$5.00 May Be  Trust Fund Contribution ☐ Added to Fees		
Z 2	ip	Country		Zip Country			This corporation owes or has paid the current year Intangible		
24	25				30		Personal Property Tax due June 30.  No		
Name and Address of Current Registered Agent							10, Name and Address of New Registered Agent		
BINDER, CHANDRA L					81	Name			
]	255 NW 21				82	Street A	Address (P.O. Box Number is Not Acceptable)		
	HOMESTEAD	) FL 33030				ļ			
					63				
					84	City	85 Zip Code		
## Purpused to the provisions of Continue COZ 0100 and COZ 0100 Electric Code					a the show	<u> </u>			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of Section 607.0505, Florida.						e-named c y the corpo s.	corporation's board of directors. I hereby accept the appointment as registered	u	
	NATURE	d or printed name of registered as					required when reinstating) DATE	_	
12.			ID DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	Pres	President a da DELETE			1.1 TITLE		Change Addition	on	
NAME	NAME Chandra Birde				1.2 NAME				
SINEEL ADDRESS   255 1000 CT 3						F ADDRESS			
_	ST-ZIP   +3-O1	L 3305			ST-ZIP				
TITLE	Vice	Vice President Eric Birder			2.1 TITLE		Change Addition	ЭП	
NAME Eric Bivaer					2.2 NAME				
STREET ADDRESS 255NW 215t CITY-ST-ZIP Homestead, FL			1. 23030	5		ADDRESS			
TITLE HOMESTEAM, PL				DELETE	2. 4 CITY- 3.1 TITLE	51-ZIP	Change Addition	on.	
	NAME				3.2 NAME	ļ			
STREE	T ADDRESS				3.3 STREE	T ADDRESS			
CITY-	ST-ZIP				3.4. CITY-	ST-ZIP			
TITLE				DELETE	4.1 TITLE		☐ Change ☐ Addition	on	
NAME	į į				4. 2 NAME	ļ			
STREE	T ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP		ST-ZIP			
TITLE				DELETE 5.1 TITLE		-	☐ Change ☐ Addition	on	
NAME					5.2 NAME				
l	T ADDRESS				5.3 STREET				
<del> </del>	CITY-ST-ZIP				5.4 CITY - 5	ST-ZIP	D Change D (423)		
TITLE				DELETE	6.1 TITLE	}	Change Addition	JI!	
NAME STREET ADDRESS					6.2 NAME	LANDERS			
STREE	I WINTHESS				6.3 STREET	AUURESS			

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.