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

**CORPORATION** ANNUAL REPORT



## Sandra B. Mortham

ANNU	ANNUAL REPORT Secretary  1998 DIVISION OF CO			y of State		Secretary of State		
1. Corporatio	MENT # P960 T'S CORNER, INC.	000906	53 (2)					iar angan diki dadi
Principal Plac	e of Business	Mailing Ac	ldroce					<b>                                    </b>
Principal Place of Business Mailing Address  1801 CORAL RIDGE DRIVE 1801 CORAL RIDGE DRIVE								
FT. LAUDERDALE FL 33305 FT. LAUDERDALE FL 33305						DO NOT WRITE IN THIS SPACE		
	-					3. Date Incorporated or Qualified 11/05/1996		
<del></del>	tace of Business	2a. Mailing	Address	•		4. FEI Number		Applied For
21		26				65-0706493		Not Applicable
Suite, Apt.		27	Apt. #, etc.	·		6. Certificate of Status Desired	Fe Fe	75 Additional e Required
City & State	θ	City & S	State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be
Zip	Country	28 Zip		Count	ív	8. This corporation owes or has pa		ded to Fees
24	25	29	ļ.	30	•	Personal Property Tax due June		□ No
	9. Name and Address of Cu	rrent Registered A	gent			10. Name and Address of New Re	gistered Agent	
	itonides, albert			8	1 Name			Į
1801 CORAL RIDGE DRIVE					2 Street Add	dress (P.O. Box Number is Not Acceptate	ole)	
FT. LAUDERDALE FL 33305					3		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				ľ	<b>3</b>			İ
					4 City		FL 85	Zip Code
11. Pursuant office or r	to the provisions of Sections 607 egistered agent, or both, in the S	0502 and 607.1508 tate of Florida, Such	Florida Statute	s, the about	ve-named cor by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept		ing its registered at as registered
SIGNATURE							DATE	
12.	Signature, typed or printed manie of registers OFFICERS	AND DIRECTORS	# (NOTE	13.	gant signatura requ	aired when reinstating)  ADDITIONS/CHANGES TO OFFICE		TORS IN 12
TITLE	PSTD		DELETE	1.1 TITLE			☐ Cha	
NAME	ANTONIDES, ALBERT			1.2 NAM	E			
STREET ADDRESS	1801 CORAL RIDGE DR			1.3 STAE	ET ADDRESS			ļ
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CITY				
TITLE			DELETE	2.1 TITLE	1		. Cha	nge 🔲 Addition 🎑
NAME OTOGET ADDOLOG				2.2 NAM				į
STREET ADDRESS					ET ADDRESS - ST-ZIP			
CITY-ST-ZIP TITLE	<del></del>		DELETE	3.1 TITLE			☐ Cha	nge Addition
NAME	•		-	3.2 NAM	1		_	· -
STREET ADDRESS				3.3 STRE	ET ADDRESS			
CITY-ST-ZIP				3.4 CITY	-ST-ZIP			
TITLE			DELETE	4.1 TITLE			☐ Cha	nge Addition
NAME				4. 2 NAM				
STREET ADDRESS					ET ADORESS			1
CITY-ST-ZIP			DELETE	4.4 City 5.1 Title			Cha	nge Addition
TITLE NAME			PT MEETIN	5.2 NAM	Į.		VIII	- Landings
STREET ADORESS					ET ADDRESS			
CITY-S1-ZIP				5.4 CITY				ŀ
TITLE	· • • • • • • • • • • • • • • • • • • •		DELETE	6.1 TITLE			☐ Cha	nge Addition
NAME				62 NAM	E			
STREET ADORESS				6.3 STRE	ET ADDRESS			

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.

FILED

May 06 1998 8:00am