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

PROFIT CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000092915 (3)

FILED May 06 1998 8:00am Secretary of State

1. Corporation Name  RELK ENTERPRI		0032310 (0	<i>'</i> )				
Principal Place of Business		Mailing Address				11 <b>0</b> 10110 (1010 1010	1 14001 WILL IDEL
10408 NW 6TH ST							
					DO NOT WRITE IN TH	HIS SPACE	
			_		3. Date Incorporated or Qualified 11/13/1996		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	A	Applied For
21		26			65-0708731		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired			
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution			
Zip	Country Zip		Count	ry	8. This corporation owes or has paid the current year Intangible		
	25   29   :  9. Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
VECCHIO, JOS		riogistoros Agorit	8	1 Name	IV. Namo and Address of Nam Hagister	ou Agont	
2929 E COMMERCIAL BLVD. BARNETT BANK TWR. PENTHOUSE STE A			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
FT LAUDERDALE FL 33308			8	3			
			8	4 City		85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, to office or registered agent, or both, in the State of Florida, Such change was authorized.				.i_ ve-named co			its registered
agent. I am familiar with	it, or hoth, in the State c , and accept the obligat	i Florida. Such change was Jous of, Section 607.05 <mark>05,</mark> Fl	authorized i orida Statul	by the corpora es.	ation's board of directors. I hereby accept the	appointment a	s registered
SIGNATURE	, <u>, </u>						
Signature, typed or protest name of rog const agent and title if applicable (NOTE:  12. OF FIGURES AND DIRECTORS			13.	gont signature rec	uired when reinstating) DAT  ADDITIONS/CHANGES TO OFFICERS (		PS IN 12
TITUE PTD			1.1 TITLE	<u>-</u>	ADDITIONS/OFFARES TO OFF TOLERS	Change	
NAME ELKIN, JEFFREY			1.2 NAME			•	
STREET ADDRESS 10408 NW 6TH ST			1.3 STRE	ET ADDRESS			
	CORAL SPRINGS FL 33071		1.4 C(TY-	ST-ZIP			
	1.00		21 THLE			☐ Change	Addition C
	ELKIN, KIM		2.2 NAMI	E			1
STREET ADDRESS 10408 NW 6TH ST				ET ADDRESS			
			2. 4 CITY - ST - ZIP			[] Ohanas	Addition
TITLE	L_J DELETE		3.1 TITLE	1		L Change	L. Addition
NAME Street address			3.2 NAMI	ET ADDRESS			1
CITY-ST-ZIP			3.4. CITY				1
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM			·	
STREET ADDRESS	et address		4.3 STREE	et address			ł
CITY-\$1-ZIP	1		4.4 CHY-				
TITLE			5.1 TITLE			Change	☐ Addition
NAME	ME		5.2 NAMI	: ]			}
STREET ADDRESS		5.3 STREE	E1 ADDRESS				
CITY-ST-ZIP			5.4 CITY	ST-ZIP			
TITLE		L] DELĒTE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				}
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		<b>/</b> )	64 CITY		n Section 119.07(3)(i), Florida Statutes. I furthe		

Thereby certify that the information supplied with this plant does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes, Torrier certify that the information indicated on this annual report or supplied earlier post 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 fur sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted of on an allast price with an address.

SIGNATURE:

VETTERY ELKIN

1/27/98

(954) 346-8683