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

· PROPIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000093426 (0)

DEPOSITION SEARCH, INC.

FILED May 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					iā lārās irni diālā (1818 sili resi	
625 N.E. 3RD AVENUE 625 N.E. 3RD AVENUE						
FORT LAUDERDALE FL 33304		FORT LAUDERDALE FL 33304		DO NOT WRITE IN T	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	III OI AOL	
				11/07/1996		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0716282	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the	_ ' _ '	
24	25	29	30	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Currer	it Hegistered Agent	81 Nam	10. Name and Address of New Registe	red Agent	
	CORPORATORS PLUS, INC.			" Kobert Statof	F 1	
	14 N. URIVERSITY DRIVE	1.4	82 Stree	et Address (P.O. Box Number is Not Acceptable)		
P	ANTATION FL 33382	Altendy	100			
		on to you.	83	20801 Biscayne	Blud Suite SOS	
		Willey.	84 City	^ /	85 Zip Code	
				nventura	r <u>r 33180 </u>	
11. Pursuant to	to the provisions of Sections 607.050 e giste red agent, or both, in the State	∉2 and 607.1508, Flo rida Statu ⊧of Florida. Such cha nge wa s	tes, the above-name authorized by the co	d corporation submits this statement for the purpo prporation's board of directors. I hereby accept the	se of changing its registered appointment as registered	
agent La	m fami liar with, and accept the oblig	ations of, Section 607. 0 505, FI	lorida Statutes.		.,	
SIGNATURE	Stundium typed or printed name of religitional again	410	11 F. T. J. A. J.	ure required when reinstating) DA	76	
12.		ID DIRECTORS	13.	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	DELETE	1.1 TillE	7.0011101101111111111111111111111111111	Change Addition	
NAME	Rossi, Steve		1.2 NAME		- , -	
STREET ADDRESS	20900 LEEWARD COURT		1.3 STREET ADDRESS			
CITY-ST-ZIP	AVENTURA FL 33180		1.4 CITY-ST-7IP	^		
TITLE		DELETE	21 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRES	s		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS	s)		
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRES	s		
CITY-ST-ZIP		<u>-</u>	4.4 CITY - ST - 7IP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		45	
STREET ADDRESS			5.3 STREET ADDRESS	s	~ 30/	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		2.04	
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME	700002536:	277	
STREET ADDRESS			6.3 STREET ADDRESS		-028	
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
14. Thereby of Indicated	certify that the information supplied wo on this annual report or supplement	rith this filing does not qualify to at annual reports true and so	for the exemption sta curate and that my s	ated in Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information le under oath; that I am an	
officer or	director of the corporation or the rec	civer or frusten empowered to	execute this report	signature shall have the same legal effect as if mac as required by Chapter 607, Florida Statutes; and	hat my name appears in	
BIOCK 12 (or Block 13 if changed, or on an atta	comen will address	/	954	-779-1999	

Steve Rossi President