

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

FILED
Jun 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra E. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000097142 (9)

1. Corporation Name
BARBARA F. PAGE, C.P.A., P.A.



Principal Place of Business: **2217 WILTON MANORS DRIVE, REAR WILTON MANORS FL 33305**
 Mailing Address: **2217 WILTON MANORS DRIVE, REAR WILTON MANORS FL 33305**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2217 WILTON DR		2a. Mailing Address 26 2217 WILTON DR		3. Date Incorporated or Qualified 12/02/1996	
22 Suite, Apt #, etc. STE B		27 Suite, Apt #, etc. STE B		4. FEI Number 65-0713094	
23 City & State		28 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip		29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Country		30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent INCORPORATORS PLUS, INC. 1214 N UNIVERSITY DR PLANTATION FL 33322				10. Name and Address of New Registered Agent			
81 Name				BARBARA F. PAGE			
82 Street Address (P.O. Box Number is Not Acceptable)				2217 WILTON DR, SUITE B			
83							
84 City				WILTON MANORS		85 Zip Code 33305	

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **BARBARA F. PAGE, CPA** DATE: **6/4/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAGE, BARBARA F	1.2 NAME	
STREET ADDRESS	2217 WILTON MANORS DRIVE, REAR	1.3 STREET ADDRESS	
CITY-ST-ZIP	WILTON MANORS FL 33305	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARSHALL, ANDREA B	2.2 NAME	
STREET ADDRESS	2217 WILTON MANORS DRIVE, REAR	2.3 STREET ADDRESS	
CITY-ST-ZIP	WILTON MANORS FL 33305	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

[Handwritten signature]
6/6/10

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*****150.00**

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.

SIGNATURE: *[Signature]* **BARBARA F. PAGE** **4/2/98** **954-FLU-4544**

CP2E034 (10/97)