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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101900 (4)

FILED Mar 12 1998 8:00am Secretary of State

Principal Place of Business 7101 WEST MCNAB ROAD STE 200 TAMARAC FL 33321 2. Principal Place of Business 21 7770 W.OAKUMA PACK Suite, Apt. #, etc. 22 100 City & State 23 5 WALLE FC. Zip Country 24 7337 25 FAULUAD 20 3331 30 FAOURAL 9. Name and Address of Current Registered Agent MICHELSON, RICHRAD R	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1996 4. FEI Number Applied For Not Applied For Not Applied For Set
2. Principal Place of Business 2. Principal Place of Business 21 7770 い OAKUMA PACK Suite, Apt. #, etc. 22 100 27 100 City & State City & State 23 ブンハインで チェ・ Zip Country 24 プラフィー 9. Name and Address of Current Registered Agent All Marries 1 Address 2 Amailing Address 2 Tity Country Suite, Apt. #, etc. PLU 2 Tity Country 2 Tity Country 2 Tity Country 2 Tity Country 3 DKOWAL	3. Date Incorporated or Qualified 12/17/1996 4. FEI Number Applied For Not App
21 7770 W. OAKLAW PACK Suite, Apt. #, etc. Suite, Apt. #, etc. 22 100 27 100 City & State City & State 23 5	3. Date Incorporated or Qualified 12/17/1996 4. FEI Number Applied For Not App
21 7770 W. OAKLAM PACK Suite, Apt. #, otc. Suite, Apt. #, etc. Suite, Apt. #, etc. 22 100 City & State City & State 23 5 WALLE FZ. Zip Country Country 24 7337 25 FACILIFAN D 9. Name and Address of Current Registered Agent All Name	12/17/1996 4. FEI Number
21 7770 W. OAKLAM PACK Suite, Apt. #, otc. Suite, Apt. #, etc. Suite, Apt. #, etc. 22 100 City & State City & State 23 5 WALLE FZ. Zip Country Country 24 7337 25 FACILIFAN D 9. Name and Address of Current Registered Agent All Name	5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible
22 100 27 100 27 100 20 28 5tate City & State 28 50000 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Certificate of Status Desired Fee Required Celection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible
22 100 27 100 27 100 28 State City & State 28 500005 5 Zip Country 25 Factor gab 29 33351 30 Factor and Address of Current Registered Agent 81 Name	Certificate of Status Desired Fee Required Celection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible
City & State 23 SONAISE FC. 24 FROM PAINTERS OF Current Registered Agent 25 PAINTERS OF PAINTERS OF CURRENT REGISTER AGENT 26 PAINTERS OF PAINTERS OF CURRENT REGISTER AGENT 27 PAINTERS OF PAINTERS OF CURRENT REGISTER AGENT 28 STONAISE FC. 29 PAINTERS OF PAINTERS OF CURRENT REGISTER AGENT 21 Name Painters OF P	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has pald the current year Intangible
23 SONAISE FC. Zip Country 24 73371 25 Pacing ab 29 3-3351 9. Name and Address of Current Registered Agent AND INC. ADM. PROLITION BY AND INC. ADM. PR	Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
Zip Country Zip Country 24 333 2 25 Sacrapas 29 3335 30 Sacrapas 9. Name and Address of Current Registered Agent MAUNT COMPANY DELIVER D. P. Country 81 Name	
9. Name and Address of Current Registered Agent	Personal Property Tax due June 30 Yes No
9. Name and Address of Current Registered Agent	
MICHELSON, RICHRAD R	10. Name and Address of New Registered Agent
18/64	dress (P.O. Box Number is Not Acceptable)
7101 WEST MCNAB ROAD STE 200	dress (P.O. Box Number is Not Acceptable)
TAMARAG FL 83321	W. CARCLOW PARK BLUE.
דו שכ "	TE 100
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named co- office or registered agent, or both, in the State of Florida Such change was authorized by the corpor agent. Lam James with accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, lyred or printed have of registered agent and to it say teatile. (NOTE Registered Agent signature reg	50N 3/4/EF
12. OF HCE RS AND DIRECTORS 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIFLE D LATIFLE 1.1 TIFLE	Change Addition
NAME MICHELSON, RICHARD R	
STREET ADDRESS 7401 WEST-MCNAB ROAD STE 200 1.3 STREET ADDRESS	
CITY-ST-ZIP TAMARAO FL 33321 1.4 CITY-ST-ZIP	
TITLE 7770 W. ORKINAN PACK DELVO 21 TITLE	Change Addition
NAME 5.75 1.0 0 2.2 NAME	
STREET ADDRESS 5-UNCISE, FC. 33517 23 STREET ADDRESS	
CITY-ST-ZIP 2 4 CITY-ST-ZIP	L Change L Addition
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NAME 3.2 NAME	
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CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE	☐ Change ☐ Addition
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STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP	
TITLE DELETE 5.1 TITLE	☐ Change ☐ Addition
NAME 52 NAME	_ · · _
STREET ADDRESS 53 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
TITLE DELETE 6.1 TITLE	Change Addition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	

14. 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: Step RICHALD MICHELSON 3/4/64 (954) 745-9788