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 # P96000103528 (1)

GERMAN-FRENCH TRANSLATIONS, INC.

FILED May 01 1998 8:00am Secretary of State



					<u>— </u>	
Principal Place of Business Mailing Address						
320 SOUTH OCEAN BOULEVARD DELRAY BEACH FL 33483		320 SOUTH OCEAN BOULEVARD DELRAY BEACH FL 33483		DO NOT WRITE IN 1	THIS SPACE	
					3. Date Incorporated or Qualified	
					12/26/1996	•
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0714588	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		26		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid th	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registe	ered Agent
EITZEN, ANDREA V				81 Name		
	SOUTH OCEAN BOULEVARD			82 Street Address (P.O. Box Number is Not Acceptable)		
	LRAY BEACH FL 33483					·
				83		
				84 City		85 Zip Code
						FL
office or r	to the provisions of Sections surribude egistered agent, or both, in the State im familiar with, and accept the obligations.	of Horida, Such change wa	is authorized	d by the corpora	rporation submits this statement for the purporation's board of directors. I hereby accept the	e appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (fi	NOTE: Flogistered	Agent signature requ		ATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELETE	1.1 111			Change Addition
NAME	EITZEN, ANDREA V		1.2 NA			
STREET ADDRESS	320 SOUTH OCEAN BOULEV	ARD	1.3 ST	REET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33483	DELETE		TY-ST-ZIP		Change Addition
TITLE		L_] DELETE	21 111			Cuaude T Voormon
NAME			2.2 NA			
STREET ADDRESS				REET ADDRESS		j
CITY-ST-ZIP		L DELETE		ITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	3 1 717			Change C Administra
NAME			3 2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		I DOUBTE		TY-ST-ZIP		Change Addition
TITLE		L DELETE	4 1 TIT			Chaude Chyodinou
NAME			4. 2 N.			,
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP	, <u>-</u>	FOLLETE		TY-ST-ZIP		Change Addition
TITLE		☐ DELETE	5 1 T/I			☐ Change ☐ Addition
NAME			5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		T7 25		TY-ST-ZIP		Change L Addition
TITLE		DELETE	6.1 TIT	i		Change Addition
NAME			6.2 NA	!		
STREET ADDRESS			63 ST	REET ADDRESS		
CITY-ST-ZIP			64 C	TY-ST-ZIP		

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.

110011

AND THE HOLL FIT

1/21/198

17/2777/100