## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

## P96000104435 (8)

## **FILED** Aug 13 1998 8:00am Secretary of State

POWERHOUSE MANAGEMENT CORPORATION										
Principal Place of Business			Malling	Mailing Address						
9722 WEST SA	MDIF ROAD		9722 W	9722 WEST SAMPLE ROAD						
CORAL SPRING				SPRINGS FL 33065						
								DO NOT WRITE IN THIS SPACE		
								3. Date incorporated or Qualified		
2. Principal Place of Business 2e. Mailing Address								12/26/1996		
·	lace of Busi	ness	F¬	2a. Mailing Address				4. FEI Number  Applien FOR 65-0752090   Applied For   Not Applied		
21 Suite Ant	# elc		26]	Suite, Apt. #, etc.				APPLIED FOR 65-0732070   Not Applicable   \$8.75 Additional		
Sulte, Apt. #, etc.				27				5. Certificate of Status Desired Fee Required		
City & State				City & State				6. Election Campaign Financing \$5.00 May Be		
23			<b>├</b> ──1	28				Trust Fund Contribution Added to Fees		
Zip	Country			Zip Cou		ountry 8. This corpo		8. This corporation owes or has paid the current year Intangible		
24		25	29		30	30		Personal Property Tax due June 30. Yes No		
	9. Name	and Address of C	urrent Registere	d Agent				10. Name and Address of New Registered Agent		
CURRIER, LEWIS W III						81	Name	DAVID ELWART		
7066 SOUTH WEST 6TH STREET						82 Street Address (P.O. Box Number is Not Acceptable)				
NOR	TH-LAUDE	RDALE FL 33068					2042 NW 104 Ave.			
						83				
						84	City 🖊	/ C / 85 Zip Code		
							COE	al Springo FL   33071		
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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										
office of 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. Lam familiar with, and accept the obligations of, section 607,0505, Florida Statutes.										
SIGNATURE							814198			
	Signature, typed	or printed name of register				red Ag	ent signature requ	ulred when reinstating) DATE		
12.		UFFICEN	S AND DIRECTO		<b>13.</b>	rı E		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	D Papaleo	DANIEL		L DELETE				L_ Change L_ Addition		
STREET ADDRESS	OTTI DIVI	, DANNEL EDĞINE NONÆ A	DT 242	1.2 NAME 1.3 STREET ADDRESS			*DODESS			
	STREET ADDRESS 2771 RIVERSIDE DRIVE, APT 31: CITY-ST-ZIP CORAL SPRINGS FL 33065			1.4 CITY-S						
TITLE	COMPL O	PRINCIS PL 3300		DELETE	2.1 Til		ZIP	Change Addition		
NAME			[] DECE IE	2.2 NAME			Charige Addition			
STREET ADDRESS	ss						ADDRESS	···		
CITY-ST-ZIP					2.4 CiT			1		
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NAME					3.2 NA	ME		Carango Carango		
STREET ADDRESS	!						ADDRESS			
CITY-ST-ZIP					3.4 CIT					
TITLE				DELETE	4.1 T(T			Change Addition		
NAME					4.2 NA	ME		on any or		
STREET ADDRESS					4.3 ST	REETA	ADDRESS	į		
CITY-ST-ZIP					4.4 CIT	Y-ST-	ZiP			
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NAME					5.2 NA	ME		Lings Cristings Line (1000001)		
STREET ADDRESS					5.3 STF	REETA	ADDRESS			
CITY-ST-ZIP					5.4 CIT	Y-ST-Z	ZIP			
TITLE				DELETE	6.1 TIT			Change Addition		
NAME					6.2 NA	ME				
STREET ADDRESS					6.3 STF	REETA	ADDRESS			
CITY-ST-ZIP					6.4 CIT	Y-ST-2	ZIP			
44	11 - 6 41		141 41 1 710 1							

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 12 if changed, or on an attachment with an address.

(064)701011023