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 #

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

P97000001031 (8)

	3830 LAKE CORP.			. (0)												
Principal Place of Business Mailing Address									* 100		II 16811 681		/#****	#101 7(8(1 2 5(9)	17141	1101 1001
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2. Principal Place of Business			2a. Mailing Address					4.	A FARECEO FOR				7	Appli	ed For	
21			26						///	Marie	<u> </u>	O			Not A	pplicable
	Suite, Apt. #, etc.	Suite, Apt. #, etc.						Cortific	ate of Sta	tue Doe	irod		\$8.75	Add	litional	
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23			28				Trust Fund Contribut							Adde	d to F	- 96\$
	Zip Country		Zιp	Zip Co				8.	8. This corporation owes or has paid the current year Intangible							gible
24	25		29		30					al Proper				Yes	Z.	Jo
		ddress of Current F	Registered Ager	nt				10.	. Name	and Add	ress of	New Re	egistered	1 Agent		
	KIRSCHENBAUM, J	ioseph ari			8	1	Name									
	3830 N 40TH AVE			8	2	Street Addres		P.O. Box	Number	is Not A	ccenta	ble)				
	HOLLYWOOD FL 3	3021					00017	et Address (P.O. Box Number is Not Acceptable)								ĺ
						3										
						4	City						85 Zip Code			
					8	•	City						FI	_ 85 Zi _l	p Cot	э ө [
11.	Pursuant to the provisions of office or registered agent, or agent. I am familiar with and	Sections 607.0502 a both, in the State of Laccept the obligate	ind 607.1508, Fl Florida. Such of Ins. f, Section 6	orida Statutes lange was au 07,0505, Flori	the about thorized b ida Statute	ve- by t	named of the corpo	corporation s t	on subm board of	its this sta directors	itement . I hereb	for the p	purpose of the ap	of changing pointment a	its reg	gistered jistered
SIC	SNATURE Signate, typical or position	M. M.	nd tric if apply able	[A				required when				_9	DAR	198		
12.		OFFICERS AND D	DIRECTORS		13.				ADDITIO	NS/CHAI	NGES TO	O OFFI	CERS AN	ID DIRECTO	ORS I	N 12
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3110	ו ביפוות איז ו				5.3 STREE	IJΑ[NNHF22									

14. Thereby 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 to 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.

5.4 CHY-\$1-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

BOM MILLO GIS

DELETE

1/ 107 8910 Van

Change

Addition

FILED

May 07 1998 8:00am

Secretary of State