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

CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

TITLE NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000006616 (1)

Principal Place of Business Mailing Address 7801 SW 57 CT 7801 SW 57 CT					
•	Principal Place of Rusiness	Mailing Address			
	7901 SW 57 CT	ŭ			

FILED Jan 30 1998 8:00am Secretary of State

ELENA	C. BLUNTZER P.A.						
Principal Plac	e of Business	Mailing Addre	ss			C 10016201 HA IDIN IADIN ADIN ADIN ADIN ADIN ADIN AD	HI 1881
7901 SW 57 CT 7901 SW 57 CT SOUTH MIAMI FL 33143 SOUTH MIAMI FL 33143					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 01/17/1997	
2. Principal Place of Business 2a. Mailing Address			dress			4. FEI Number Applie	
21 26							pplicable
Sulte, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Regulary Fee Regulary	
City & Stat	е	City & Stat	9			6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F	
Zip	Country	Zip		Country		8. This corporation owes or has paid the current year Intang	
24	25 29 30		<u> </u>		Personal Property Tax due June 30. Yes N	<u> </u>	
·	9. Name and Address of Cu UNTZER, CHRISTOPHER J	rrent Registered Agen	l	81	Name	10. Name and Address of New Registered Agent	
7901 SW 57 CT SOUTH MIAMI FL 33143			82		Address (P.O. Box Number is Not Acceptable)		
				84	,	FL 85 Zip Cod	
office or r	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	itate of Florida. Such ch	anoe was auth	orized by	/ the corpo	corporation submits this statement for the purpose of changing its re- poration's board of directors. I hereby accept the appointment as reg	gistered istered
SIGNATURE						tuquirod whon reinstatino) DATE	
12.	Signature, typed or printed name of registere	AND DIRECTORS	(NOTE: He	gistered Agr	nt signature ti	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	N 12
TITLE			DELETE 1,1 TITLE		<u>-</u>	Change	Addition
NAME	BLUNTZER, CHRISTOPHE			1.2 NAME		BLUNTZER, CHRISTOPHER J	
STREET ADDRESS	7901 S.W. 57 COURT			1.3 STREET	ADDRESS	Bean feet,	
CITY-ST-ZIP	SOUTH MIAMI FL 33143			1.4 CITY - S	1-2IP		
TITLE	P DELETE		DELETE	2.1 TITLE		Change	Addition
NAME	Bluntzer, Elena C			2.2 NAME			
STREET ADDRESS	7901 SW 57 CT			2.3 STREET	ADDRESS		
CITY-ST-ZIP	SOUTH MIAMI FL 33143			2. 4 CITY -	ST-ZIP		
TALE			DELETE	3.1 TITLE	Ţ	☐ Change	Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET	ADDRESS		

CITY-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

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

4.1 TITLE

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

DELETE

Change

Change

☐ Change

Addition

Addition

Addition