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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Mar 02 1998 8:00am

Secretary of State

561-368-2042

Secretary of State **DIVISION OF CORPORATIONS** 

1. Corporation Name														
EUSTIS MARKETPLACE, INC.											4 ATĀJĀĀS ĀJĀ 1815. 1816.1 ATĀJĀ ĀĀJĀ ĀĀ	iii <b>Be</b> arr <b>ee</b> rr		1/ <b>h</b>
Principal Place of Business Mailing Address													O DINI NGBIO IB	140 0131 1001
200 WEST PALMETTO PARK ROAD 200 WEST PALMETTO					PARK	PARK ROAD								
SUITE 301 BOCA RATON FL 33432					SUITE 301 BOCA RATON FL 33432					DO NOT WRITE IN THIS SPACE				
				•					Ī	3. Date Incorporated or Qualified				
<u> </u>		V									01/23/1997			
<u> </u>	Principal P	Principal Place of Business			2a. Mailing Address						4. FEI Number 65-0723274		<u> </u>	oplied For
21	Suite, Apt. #, etc.			26]	Suite, Apt. #, etc.						01-0100007		\$8.75	ot Applicable
22				27	27					İ	5. Certificate of Status Desired			Additional Equired
•	City & State				City & State						6. Election Campaign Financing		\$5.00	May Be
23		Tin.			28						Trust Fund Contribution		Added	
24	Zip		Country 25	201	Zip	30	Country 	y			8. This corporation owes or has pa	_		tangible ☐ No
				29 dress of Current Registered Agent			<u>,01</u>			I	Personal Property Tax due June 30. Yes No.  10. Name and Address of New Registered Agent			
CORPCO, INC.								1	Name			=	- <del>7</del>	
2699 SOUTH BAYSHORE DRIVE						B2	2 Street Address (P.O. Box Number is Not Acceptable)							
		'H FLOOR						L	Otroot No		- I .O. DOX Hambel to Hot Nocopiac	,,,,		
	MI/	AMI_FL 33133						1						
		٠					84	7	City		<del>-</del>	FL	85 Zip	Code
11	. Pursuant	to the provi	sions of Sections 607.0	502 and 6	07.1508, Florida Sta	he abov	e-n	named co	orpor	ration submits this statement for the p	urpose of	changing it	s registered	
	agent. La	ım familiar v	with, and accept the ob	igations o	f, Section 607.0505,	Florida	Statute	S.	ie corpor	auoi	ins board of directors. Thereby accep	vi in app	Ominion as	10glatared
SH	GNATURE									DATE				
12	·	Signature, typed or printed name of registered agent and tille il applicable (NOTE: R  OFFICERS AND DIRECTORS					Registered Agent signature requested 13.			QUIE	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE		DELETE					1.1 TITLE		E	PRE	s.		☐ Change	X Addition
NAME						1	1.2 NAME		0	JUL	ISANO, FRANK J.			
STREET ADDRESS							1.3 STREET	T AD	1		WEST PALMETTO PARK			
CITY-ST-ZIP			·		I Deceme		1.4 CITY-	ST-Z	ZIP <b>E</b>	30C	A RATON, FLORIDA 33	432	Ohanaa	1.440
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STREET ADDRESS CITY-ST-ZIP							2. 4 CiTY-							
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NAME						J	3.2 NAME							}
STREET ADDRESS						]	3.3 STREET	I ADI	DRESS					
CITY-ST-ZIP			· _ · · · · · · · · · · · · · · · · · ·				3.4. C·TY-	ST-	ZIP					
TITE					☐ DELETE		4.1 TITLE				•		L. Change	☐ Addition
NAN							4. 2 NAME		DOTOC					
	REET ADDRESS					1	4.3 STREET							1
TITE	Y-ST-ZIP LE	<u>-</u> -			DELETE		4.4 CITY-8 5.1 TITLE	51 - Z	CH"				Change	☐ Addition
NAM	į						5.2 NAME							
	REET ADDRESS					1	5.3 STREET	ADI	DRESS					
CiT	Y-ST-ŽIP						5.4 CITY - S	3T - Z	ZIP					
TITL	.E				DELETE		6.1 TITLE						Change	Addition
NAA	ME						6.2 NAME							
	EET ADDRESS	:				ı	6.3 STREET							
	Y-ST-ZiP	ertify that th	ne information supplied	with this f	ding does not qualify	v for the	6.4 CITY+S			in Se	action 119 07(3)(i) Florida Statutes I	further co	rtify that the	information
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 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 officer or director of the corporation of 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 chapter 6 or many attachment with an address.  AN 6 - 1000													attamen [	