## 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 # P9700008228 (3)

SUPER SKATES V. INC.

## FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						/ 184/1841 119 (01): 1861 0011; 6011; 6011; 6011; 6011; 6010 1010 1
1378 SOUTHW	/EST 160TH AVENUE	1378 SOUTH	1378 SOUTHWEST 160TH AVENUE			
SUNRISE FL 3	13326	sunrise fl	SUNRISE FL 33326			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						01/27/1997
A Delegated D	and Displace	On Mailing A	ddroes			4. FEI Number Applied For
	ace of Business	·	2a. Mailing Address			65-072 4309 Not Applicable
Suite, Apt.	# 010	26 Suite An	Suite, Apt. #, etc.			S8 75 Additional
	m, <del>G</del> IO.	— — · · ·				5. Certificate of Status Desired Fee Required
City & State			City & State			6. Election Campaign Financing \$5.00 May Be
23		— ·	28			Trust Fund Contribution Added to Fees
Zip	Country		Zip Country			8. This corporation owes or has paid the current year Intangible
24	25	29	3	¬		Personal Property Tax due June 30. X Yes No
<u> </u>	9. Name and Address of Curr			-		10. Name and Address of New Registered Agent
GO	LDBERG, MARK H			81	Name	
	00 STIRLING ROAD			-	Chroni	Address (D.O. Boy Number is Not Aggestable)
	TE-1			82	Street	Address (P.O. Box Number is Not Acceptable)
	OPER CITY FL 33024			83		
	OFEN OIT FE 33024			<u> </u>		
				84	City	FL 85 Zip Code
11 Pursuant I	to the provisions of Sections 607.0	502 and 607.1508. F	lorida Statutes	, the a ove	e-named	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such d	:hande was au!	horize by	the corp	poration's board of directors. I hereby accept the appointment as registered
•	m tamiliar with, and accept the ob-	igations or, section	007.0303, 1 1011	da Sia ile	<b>5</b> ,	
SIGNATURE	Signature, typed or prefer name of registered a	agent and title if applicable	{NOTE: I	Registere Age	ent signature	e required when reinstating) DATE
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE		1.1 TO LE		PO Change Addition
NAME			1.2 NAME	12 NAME STLBERMAN, ARTHURS		
STREET ADDRESS					609 VENONA PL	
CITY-ST-ZIP			1.4 CITY- 9	ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE	DELETE		2.1 TITLE		UD ☐ Change ☑ Addition	
NAME			2.2 NAME RE		RETUFELD PETER	
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP				2 4 CITY-	ST - ZIP	PLANMEZIN FL 33323
TITLE	☐ DELETE			3 1 TATLE		Change  Addition
NAME				3 2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP				3.4. CITY -	ST-ZIP	
TITLE			DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP	
TITLE	☐ DELETE			5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREE	F ADDRESS	1
CITY-ST-ZIP				5.4 CITY-1	ST-ZIP	
TITLE		. [	DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREE	T ADDRESS	
CITY-\$T-ZIP				6.4 CITY-		
40 11	and the standard of the continuous continuous	Lucitle this filian door	not auplifu for	the evemi	tion state	ted in Section 119.07(3)(i) Florida Statutes. I further certify that the information. I

4. 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 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.

Lile

4/23/98

954-349-0400