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

**CORPORATION ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000010828 (6)

LAWRENCE J. SCANLON, P.A.

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



Principal Place of Business				Mailing	Mailing Address				. (000,001) 144 (000, 365), 460), 400), 400)
1900 GLADES ROAD STE 352				1900 GLADES ROAD STE 352					
BOCA RATON FL 33431-7333			BOCA	BOCA RATON FL 33431-7333				DO NOT WRITE IN THIS SPACE	
									3. Date Incorporated or Qualified
									02/04/1997
2. Principal P	lace of Busine	088	<del></del>	2n. Ma	iling Address	······································			4. FEI Number Applied For
21				H-1	26				58-230 4424 Not Applicable
Suite, Apt #, etc.					Suite, Apl. #, etc.				SS 75 Additional
22				27	27				5. Certificate of Status Desired Fee Required
City & State					City & State				6. Election Campaign Financing \$5.00 May Be
23			28	28				Trust Fund Contribution Added to Fees	
Zip		Country		Zip		Co	ountry		This corporation owes or has paid the current year Intangible
24		5		29		30			Personal Property Tax due June 30. Yes No
g, Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent		
CR	ioyle, <del>Ph</del> ili	ΡJ					81 Name		
190	00 GLADES	ROAD STE	352				82	Street	et Address (P.O. Box Number is Not Acceptable)
BOCA RATON FL 33431-7333								0.000	The second of th
							83		
							84	City	85 Zip Code
							-		FL [T]
11. Pursuant	to the provision	ns of Section	s 607 0502	2 and 607.1	508, Florida Statu	tes, the	above	-named	od corporation submits this statement for the purpose of changing its registered
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this 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 agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.									
SIGNATURE Philip J City e Signature, typod of pentiad name of registered agont and fille if applicable (NOTE: Registered Ago								4-28-98	
Signature, typed of ponted name of registered agent and filler if applicable (NOTE: Registered  12. OFFICERS AND DIRECTORS  13.								ni signalure	ure required when reinstating) DATE
12.		<del>/</del>			Delete	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12    PR = 5 (D=NT   Change   Addition
TITLE	,			TITLE		PRESIDENT Change Addition			
NAME	Ladre	wee T	500	w/on	, 	1.21	NAME		LAWRENCE S. SCANLOW
STREET ADDRESS	1900	5. A.C.S	Part.	۔ ہے۔	352	1.3		ADDRESS	1 PLURENCE J. SCHNLOW 1900 Glades Rol. STE 352 Boen Retow FL 33431-7333
CITY-ST-ZIP TITLE	15016 2	Yerre		33%	37 - 233 <u>.</u>	5 1.41	CITY-S	T- ZIP	Suca /44700 FL 3343/ 7333
							Change C Addition		
NAME ATTECT ADDRESS							NAME		
STREET ADDRESS							-	ADDRESS	
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NAME STOREST ADODESIS							NAME	*******	.
STREET ADDRESS								ADORESS	
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							SIKEET CITY-S		
CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·			DELETE	—•—	TITLE	1-217	Change Addition
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							CITY-S		'
CITY-ST-ZIP TITLE					DELETE	_	TITLE	I - EIF	Change Addition
NAME				•		4	NAME		
STREET ADDRESS						1		ADDRESS	,
CITY-ST-ZIP							SINEEI CITY-S'		
VIII-91-2IF	I					<b>■</b> 041	0111-9	1 - CIF	

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 Block 12 or Block 13 if changed, or on it attachment with an address.

SIGNATURE: