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

P97000012941 (5) DOCUMENT # 1. Corporation Name

FILED Jan 21 1998 8:00am Secretary of State

DFL TF	RUCKING, INC.	•				
Principal Plac	e of Business	Mailing Address				(48)
	NE HILL CIRCLE	11200 JASMINE HILL CIRCLE				
BOCA RATON	I FL 33498	BOCA RATON FL 33498				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						02/07/1997
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-3435053 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				- \$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat	е	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zip		Country	•	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	 Name and Address of Current 	Registered Agent		- 04		10. Name and Address of New Registered Agent
	EUD, LEE S			81	Name	
	200 JASMINE HILL CIRCLE		Ī		Street Ad	Address (P.O. Box Number is Not Acceptable)
ВО	CA RATON FL 33498					
				83		
				84	City	FL 85 Zip Code
dd Discounat	to the monthless of Continue CO7 0500	and 607 1500 Flor	ida Statutan di	an about	a named o	
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.						
agent, I a	m familiar with, and accept the obligat	tions of, Section 607	.0505, Florida	Statutes	S .	•
SIGNATURE	Signature, typed or printed name of registered agent	r and title if applicable	/NOTE Rea	istored Ace	ent signature re	required when reinstating) DATE
12.	OFFICERS AND			13.	biginatoro to	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			1.1 TITLE		Change Addition
NAME	FREUD, LEE S			1.2 NAME		
STREET ADDRESS	11200 JASMINE HILL CIRCLE			1.3 STREET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498			1.4 CITY - S	T-ZIP	
TITLE	D	D		2.1 TITLE		Change Addition
NAME	FREUD, DIANE S			2.2 NAME		
STREET ADDRESS	11200 JASMINE HILL CIRCLE			2.3 STREET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498			2. 4 CITY - 5	ST-ZIP	
TITLE		D		3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY - ST - ZIP				3.4. CITY-S	ST-ZIP	
TITLE		D	ELETÉ	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY - ST - ZIP				4.4 CITY-S	T- ZIP	
TITLE		D	ELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP			▋.	5.4 CITY-S	T-ZIP	
TITLE		□ D		6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET	ADORESS	
CITY - ST - ZIP				6.4 CITY-S		
14 Iherebus	satify that the information supplied with	h this filing does no				d in Section 119 07(3)(i) Florida Statutes. I further certify that the information

852-6762