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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000012963 (9)

FACE OFF INC.

## FILED Apr 24 1998 8:00am Secretary of State



B.111 B) -	75	NA TON A STATE OF			
Principal Plac		Mailing Address			
1730 N 47 A HOLLYWOOD		1730 N 47 AVENUE HOLLYWOOD FL 33021			•
HOLLINOOL	716 33021	HOLLINOOD IL GOEI			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 02/10/1987
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21 1740	O NW 122 TERR	26			65-0725600 Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27			Fee Required
City & Stat		City & State			6. Election Campaign Financing \$5.00 May Be
23 PEMB	ROKE PINES FL	28			Trust Fund Contribution Added to Fees
"Zip	Country	Zip	Country	•	8. This corporation owes or has paid the current year Intangible
24 330		- <del></del>	30		Personal Property Tax due June 30. 🔀 Yes 🔲 No
	9. Name and Address of Current I	Registered Agent		<del>,</del> -	10. Name and Address of New Registered Agent
	AGNON, ANDRE		81	Name	е
17	30 N. 47 AVENUE		82	Street	et Address (P.O. Box Number is Not Acceptable)
HOLLYWOOD FL 33021					
	•		83		
			84	City	85 Zip Code
			04	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abov	e-named	d corporation submits this statement for the purpose of changing its registered
office or r	r <b>egistere</b> d agent, or both, in the State of im <b>fam</b> iliar with, and accept the obligation	<ul> <li>Horida, Such change was au ons of Section 607 0505. Flor</li> </ul>	uthorized by rida Statute:	/ the corp	orporation's board of directors. I hereby accept the appointment as registered
	and the grade state of the congress	5.10 5.1 555.10 1 <b>5</b> 0.1 1 50 <b>.</b>	aa olalaia		
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (NOTE	Registered Age	ent eignature	ure required when reinstaling) DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	Gagnon, andre		1.2 NAME		
STREET ADDRESS	1730 N 47 AVENUE		1.3 STREET	ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 CITY - S	T-ZIP	
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	GAGNON, FRANCINE		2.2 NAME		DI WHATO TINO
STREET ADDRESS	1730 N 47 AVENUE		23 STAEET	ADDRESS	listant with a compact
CITY-ST-ZIP	HOLLYWOOD FL 33021		2. 4 CITY-	SI - 7IP	PEMBROKE PINES FL 33024
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP			3.4. CITY-		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	
City-St-ZiP			4.4 CITY - S		
TITLE		DELETE	5.1 TITLE	. 1011	☐ Change ☐ Addition
NAME		<u> </u>	5.2 NAME		_ •
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY - S		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	,		6.3 STREET	ADDRESS	
	1 <b>.</b>				
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for	6.4 CiTY-S		Lated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or supplemental annual roport 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.					