## 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

	JMENT JOD NAME EXPRESS		00001	5495 (9)	)						
Principal Place of Business Mailing Address						_					
1499 S.W. 30TH AVENUE				1499 S.W. 30TH AVENUE							
SUITE 23 BOYNTON BEACH FL 33426				SUITE 23 BOYNTON BEACH FL 33426				DO NOT WRITE IN THIS SPACE			
BOTHTON BENOTTE 33420								3. Date Incorporated or Qualified			
								02/14/1997			
<del></del>				a. Mailing Address				4. FEI Number AD 20 SILE Applied For	_		
Suite, Apt #, etc.				Suite, Apt. #, etc.				65-0728545 Not Applicable	e		
22				27				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be			
Zip	ip Country Zip				Cou	Country		Trust Fund Contribution	-		
24		25	29	ΣIÞ	30	нву		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent			
GOLDBURG, MICHAEL J						81	Name		٦		
1499 S.W. 30TH AVENUE						82	Street Add	dress (P.O. Box Number is Not Acceptable)	-		
SUITE 23							• • • • • • • • • • • • • • • • • • • •		_]		
BOYNTON BEACH FL 33426					ĺ	83			- [		
					l	84	City	FL 85 Zip Code	$\neg$		
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									.		
Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered 12. OFFICERS AND DIRECTORS 13.						I Age	ent signature requ	uired when reinstalling)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE						LE	P	President Change Addition	<u>-   }</u>		
NAME 1.2 N						ME	M	lichael J. Goldburg 142 Pine Circle	[2		
STREET ADDRESS 1.3 ST						REET			1		
						T-ZIP &	oca Rator, FL 33432	_ ջ			
TITLE	<del></del>		2.1 (1)		ļ	Change Addition	ء اد				
NAME					2.2 NA	_	j				
STREET ADDRESS							ADDRESS		ļ		
CITY-ST-ZIP TITLE					2. 4 CI 3.1 TiT		ST-ZIP	Change Addition			
NAME					3,1 III 3,2 NA				<u>'  </u>		
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					3.4. Ci				İ		
TITLE	+			DELETE	4,1 1)]		21-51L	☐ Change ☐ Addition			
NAME				_	4, 2 NA			<b>_</b>			

CITY-ST-ZIP ITY-ST-ZIP 14. I hereby certify that the information supplied with this filinincated on this annual report or supplemental annual reference or director of the corporation or the receiver or the Block 12 or Block 13 if changed, or on an attachment with the corporation of the receiver or the Block 12 or Block 13 if changed, or on an attachment with the corporation of the receiver of the Block 12 or Block 13 if changed, or on an attachment with the corporation of the receiver of the corporation emption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of that my signature shall have the same legal effect as if made under oath; that I am an this report as required by Chapter 607, Florida Statutes; and that my name appears in

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

TREET ADDRESS

5.4 CITY-ST-ZIP

TITLE AME

5.1 TITLE

5.2 NAME

DELETE

DELETE

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

Change

Change

\_\_\_ Addition

**FILED** 

Jan 20 1998 8:00am

Secretary of State