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

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 23 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	JMENT # P9700( VENTURES, INC.,	0015901 (6)			Oliva kasil adira kati kati
Principal Pla	ice of Business	Mailing Address			DIIIO (014)
7677 SO MILITARY TRAIL LAKE WORTH FL 33463  7677 SO MILITARY TRAIL LAKE WORTH FL 33463			ι	DO NOT WRITE IN THIS S	PACE
				3. Date Incorporated or Qualified	, AGE
				02/17/1997	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26			Not Applicable
Suite, Ap	t. #, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27		·	·	<b>5.</b> 55 mode of change 550mbs	Fee Required
City & Ste	ate	City & State		Election Campaign Financing	<b>\$5.00</b> May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the curr	ent year Intengible Yes <b>X</b> No
24	25 25 Name and Address of Curren	t Registered Agent	30	Personal Property Tax due June 30.  10. Name and Address of New Registered A	
	REEMAN, DONALD J		81 Name		
	400 CETREPARK BLVD. STE 909 /EST PALM BEACH FL		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
			84 City	FL	85 Zip Code
office or agent. I	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, Fl	authorized by the corpora orida Statutes.  IE Registered Agent signature req-	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose	changing its registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		L. Change L Addition
NAME	BOYD, WILLIAM W		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL 33463		1,4 CITY-ST-ZIP		<del></del>
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	BOYD, TRACEY F		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-Z#P	LAKE WORTH FL 33463	Decem	2. 4 CITY-ST-ZIP		
TITLE	D ADAMA	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BOYD, ADAM M		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL 33463	DELETE	3.4. CITY - ST - ZIP 4.1 TIBLE		Change Addition
TITLE .	D DOWN	L DELCTE			CHANGE THE MOUNTON
NAME STREET ADDRESS	80YD, ERIN M 7677 SO MILITARY TRAIL		4. 2 NAME		
STREET ADDRESS	LAKE WORTH FL 33463		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	LANE WORLD PL 33403	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME	1			البرام	en accessed for conductions
STREET ADDRESS	.1		5.3 STREET ADDRESS	υ4(23	
CITY-ST-ZIP	' <b> </b> :		5.4 CITY-ST-ZIP	')	
TITLE	<del>                                     </del>	☐ DELETÉ	6.1 TiTLE	40000249908	Change Addition
NAME	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		6.2 NAME	-04/24/980101901	9
			6.3 STREET ADDRESS	*** <b>1</b> 50.00	

14. 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 chartery or on an attachment with an address.