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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Apr 13 1998 8:00am

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	JAL REPORT 1998	Secretary DIVISION OF CO		Secretary of State
DOCUN 1. Corporation		0021323 (5)		
11110 00	Mottootion, ato-			
Principal Place	e of Business	Mailing Address		
3348 NW 23RD COURT BOCA RATON FL 33431		3348 NW 23RD COURT BOCA RATON FL 33431		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 03/03/1997
21	ace of Business	2a. Mailing Address 26		4. FEI Number Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required
City & State	3	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	1 Decision of Agent	10	Personal Property Tex due June 30. Yes No
MID	9. Name and Address of Curren	r negistered Agent	81 Name	10. Name and Address of New Registered Agent
	ion, robert 18 NW 23RD Court			
	CA RATON FL 33431		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
500	5A 1011 514 1 E 50101		83	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, I am far in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appropriate agent, I am far in the state of Florida Statutes.				
SIGNATURE	<i>KIUSVIV * V VI VI/U I 1</i>		Registered Agent signature require	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME OTREET ADDRESS	MIRON, ROBERT POST OFFICE BOX 8691		1.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL 33065		1.3 STREET ADDRESS 1.4 City-St-Zip	
CITY-ST-ZIP TITLE	COTIAL OF MINOS FE 55005	DELETE	2.1 TRLE	Change Addition
NAME		-	2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
THLE		L_J DELETE	3.1 TITLE	L Change Addition
NAME			3.2 NAME	
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY - S1 - ZIP	
TITLE		DELETE	4.1 Title	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	•
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS : 5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TIDLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY - ST - ZIP		·	6.4 CITY - ST - ZIP	
14. I hereby or indicated of officer or d Block 12 o	ertry that the information supplied wi on this annual report or supplementa firector of the corporation or the reco or Block 13 if changed, of opygan attac	th this filing does not qualify for t il annual report is true and accur ever or trustee empowered to ex- chinent with an address.	the exemption stated in trate and that my signatur ecute this report as requ	Section 119.07(3)(i), Florida Statufes. I further certify that the information re shall have the same legal effect as if made under oath, that I am an sirred by Chapter 607, Florida Statutes; and that my name appears in