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

CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000021467 (0)

CORAL SPRINGS INVESTMENT GROUP, INC.

TALLAHASSEE FL 32301-2525

Pr	rincipal Place of Business	Mailing Address				
9600 WEST SAMPLE ROAD SUITE 205 CORAL SPRINGS FL 33065		9600 WEST SAMPLE ROAD SUITE 205 CORAL SPRINGS FL 33065		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 03/07/1997		
2.	Principal Place of Business	2a, Mailing Address		4. FEI Number Applied For		
21		26		65-0734079 Not Applica		
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired X \$8.75 Additional Fee Required		
23	City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
24	Zip Country 26	Zip C	ountry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	g. Name and Address of C	Current Registered Agent		10. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Lawrence R. Hamel set Address (P.O. Box Number is Not Acceptable)		
			82 Stre	BU MUDIUSS IT JU. DUX NUTIDOS IS NOU MCCODISDIO)		

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12.	positive, typod or printed name of registered agent and title if applic OFFICERS AND DIRECTORS		Registered Agent signature requi	ized when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	3S IN 12
TITLE	D OTTOLIS AND EMICOTORS	DELETE	1.1 TOLE	Change	Additlo
NAME	HAMEL, LAWRENCE R		1.2 NAME	,	
STREET ADDRESS	9600 W SAMPLE RD, STE 205		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	CORAL SPRINGS FL 33085		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE	Change	Additio
NAME			2.2 NAME	-	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	•	
ITLE		DELETE	3.1 TITLE	☐ Change	☐ AddItio
IAME			3.2 NAME		
STREET ADDRESS			3.9 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
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AME			4. 2 NAME		
TREET ADDRESS			4.3 STREET ADDRESS		
ITY-ST-ZIP			4.4 CITY-ST-ZIP		
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IAME .			5.2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		
ITY-ST-ZIP			5.4 CITY-ST-2IP		
ITLE		☐ DELETÉ	6.1 TITLE	Change	Additio
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
11TV CT 71D			6 4 0 TV 67 710		

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 changed, or on an exactment with an address.

3/2/98

Street Address (P.O. Box Number is Not Acceptable)
9600 West Sample Rd. -

(954) 753-4444

FILED

Mar 19 1998 8:00am

Secretary of State

Applicable