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

DOCUMENT # P97000021941 (4)

FILED Jul 02 1998 8:00am Secretary of State

Principal Place of Business 4488 NORTH UNIVERSITY DRIVE LAUDERHILL FL \$3351	Mailing Address 4488 NORTH UNIVER LAUDERHILL FL 333			DO NOT WRITE IN TH	
				3. Date Incorporated or Qualified	19 SFACE
				03/04/1997	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.			131144	Not Applicab
22	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Çity & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	Zip	Cour	ntry	8. This corporation owes or has paid the	
24 25	29	30		Personal Property Tax due June 30.	Yes No
Name and Address of Current	i Hegistered Agent		81 Name	10. Name and Address of New Registers	a Agent
BERG, KENNETH					
4488 N UNIVERSITY DR Lauderhill Fl 33351		[82 Street Add	lress (P.O. Box Number is Not Acceptable)	
ENDOGUNICE LE 99991		ļ	83		
		,	84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607-0507 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation of the section of the secti	of Florida Such change vitions of, Section 607.0505	was authorized 5, Florida Statu	by the corporalites.	poration submits this statement for the purpose tition's board of directors. I hereby accept the a	appointment as registered
12 CHICERS AND	DIRECTORS	13.	Agein & Griature 16da	ADDITIONS/CHANGES TO OFFICERS A	
TITLE President	☐ DELFTE		LF	TISSITION OF STREET	Change Addition
TITLE NAME Kenneth Berg STREET ADDRESS 3180 South Ocean CITY-ST-ZIP Hollande KLA.	. 41.11	1.2 NAM	ME		
STREET ADDRESS 3180 South Ocean	_ Drive #410	1.3 \$18	KEET ADDRESS		
CITY-ST-ZIP Hollantel KL. A.	<i>33</i> 0 9	1.4 CIT	Y-ST-ZIP		
TITLE	DELFTE	2.1 TITL	rt		Change Addition
NAME		2.2 NAM	ME		
STREET ADDRESS		4 2 2 2 10			
		2.0018	REET ADDRESS		
CITY-ST-ZIP	- Drugge	2.4 CIT	Y-ST-ZIP		Change T Addition
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4. I hereby 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 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 changed, priority in attachment with an address.

CICNATURE.

4/3./08 1-954-746-00