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 # P97000023104 (7)

BENSON-WATSON, INC.

FILED
Apr 17 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address									-{ F 1001490F (10 10(1) 100)(00)(1 00)(1 90)(1 90)(1 00)(0 (100) 1440 150)(010(1 010) 100(
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Suite, Apt. #, etc.			11	Suite, Apt. #, etc.					- 0 00 10 10 1	7.5			\$8.75	Additional
22			27	27				ļ	5. Certificate of Statu	us Desirea	LJ		Fee	Required
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23				28					Trust Fund Contrib	bution	🖵		Adde	d to Fees
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24		25	29	A	30				Personal Property 10. Name and Addre			X		□ No
9. Name and Address of Current Registered Agent								Name	10. Name and Addre	ISS OI NEW	register	eu Ay	9111	
BENSON, JANE						81 Name								
228 SW 14TH STREET POMPANO BEACH FL 33060-8761						82	S	Street Address	s (P.O. Box N umber is	Not Acce	ptable)			
						83			·,·•					
						84	C	City				FL	85 Zij	o Code
44 Pigen	ant to the provis	ions of Sections 607.050	2 and 6	07 1508 Florida Statut	es the	l	L	amed cornora	etion submits this state	ement for the	ne nurnos	e of c	anging	its registered
office	or registered ac	gent, or both, in the State ith, and accept the obliga	of Horid	da. Such change was a	authoriz	ed by	/ the	e corporation	's board of directors. I	I hereby ac	cept the	appoir	lment a	s registered
		itit, and accept the obliga	HUOHS OF	r, Section 607.0305, FR	Jilua Si	alutes	5.							
SIGNATUI		for pointed name of registered ager	a Ine	gnature required v	when reinstating)		DAT	E	· · · · · · · · · · · · · · · · · · ·					
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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 suppliencental 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 attachment with an address.

1.1.98

941-6985