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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000023580 (8)

14. Thereby certify that the information supplied with this time indicated on this annual report or supplemental annual report or director of the corporation or the receiper or true Block 12 or Block 13 if changed, or or an attachment that

BOA INDUSTRIES, INC.					
					i kaanaan kir kaki krak bahi bahi bahi bahi bahi bahir kirak aliri kelik dari dari
i '	ce of Business	Mailing Address			
8024 NW 29 ST. 8024 NW 29 ST. MIAMI FL 33122					
MINIMITE.	NIEE	MICHAEL STIEE			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
6 Principal F	No. of Duginons	Da Mailing Address			03/12/1997 4. FEI Number Applied For
2. Principal Place of Business 2a. Maili		2a. Mailing Address			4. FEI Number Applied For Not Applicable
		Suite, Apt. #, etc.			SR 75 Additional
27					5. Certificate of Status Desired Fee Required
City & State Crty & State					6. Election Campaign Financing \$5.00 May Be
Zip	Country	<b>28</b>	Country	:	Trust Fund Contribution Added to Fees
24	25		30	Y	B. This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30, Yes No
57	9. Name and Address of Curre		501		10. Name and Address of New Registered Agent
Z	IGHELBOIM, ANDREW		81	Name	
	024 NW 29 ST.		82	Street A	Address (P.O. Box Number is Not Acceptable)
	MAMI FL 33122		83	ļ	
			63		
			84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its regist					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or profited hance of registered agent and life of applicable (NOTL Registered Agent signature requires when reinstating)  DATE					
12.	·	VD DIRECTORS	13.	ent signature	required when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 TITLE	]	☐ Change ☐ Addition
NAME	ZIGHELBOIM, BORIS		1.2 NAME		
STREET ADDRESS	3567 NW 61 ST. CIRCLE		1.3 STREET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	T proper	1.4 CITY - S	ST - ZIP	
TITLE		[_] DELETE	2 1 TITLE	-	Change Addition
STREET ADDRESS			2.2 NAME 2.3 STREET	. VDUBEGG	
CITY-ST-ZIP			2.4 CITY-		`
TITLE	<u></u>		3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	ļ	
STREET ADDRESS			3 3 STREET	ADDRESS	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	
TITLE	l l		4.1 TITLE	ļ	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET	ſ	
CITY-ST-ZIP TITLE	<u> </u>	DELETE	4.4 CITY - S 5.1 TITLE	1-212	☐ Change ☐ Addition
NAME			5.2 NAME	}	man or many and the state of th
STREET ADDRESS			5.3 STREET	ADDRESS	j
CITY-ST-ZIP			5.4 CITY - S		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	-	
			-		

dress of quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in the full and accurate and that my signature shall have the same legal effect as if made under oath; that I am an endough the execute this report as required by Chapter 207, Florida Statutes; and that my name appears in an address.