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 #

FILED Mar 23 1998 8:00am Secretary of State

i, corporation	DISC, INC.	00024090 ((+)			
Principal Place of Business Mailing Address					1 (30)(1964)(in 12)() (00)(00)(00)(04)((93)() 00)(4 (10)(0)() 4)() 6)() (00)	
200 EAST LA	S OLAS BLVD	200 EAST LAS OL	200 EAST LAS OLAS BLVD			
SUITE 100		SUITE 100				DO NOT MOUTE IN THIS COASE
FORT LAUDE	RDALE FL 33301-2248	FORT LAUDERDALE FL 33301-2248				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
						03/18/1997
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number - Annied For
21		26				65 - 0739919 Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		[27]				Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
Zip Country		Zip Country			Trust Fund Contribution Added to Fees	
24	25	29	30	Country	y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Cur		1301			10. Name and Address of New Registered Agent
CO	RPORATION SERVICE COMP			81	Name	
	1 HAYS STREET			82	Circol Add	Iress (P.O. Box Number is Not Acceptable)
TALLAHASSEE FL 32301-2525				02	Street Add	aress (P.O. Box Number is Not Acceptable)
• • •				83		
				84	City	85 Zip Code
					City	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered		(NOTE: Reg			poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered alred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE 1.		1.1 TITLE		☐ Change ☐ Addition
NAME			1.2 NAME	ļ		
STREET ADDRESS 200 E LAS OLAS BLVD, STE					odress .	
CITY - ST - ZIP				1.4 CITY-ST-ZIP		
TITLE			2.1 TITLE	ļ	Change Addition	
NAME	MEISKEN, JEFFREY			2.2 NAME		
STREET ADDRESS	CORT LAUDEDDALE CL 00004 0040			2.3 STREET ADDRESS		
CHTY-ST-ZIP			2. 4 C/TY - ST	-ZIP	Change Addition	
TITLE NAME		ت مدرد		3.1 TITLE 3.2 NAME		Change Application
STREET ADDRESS				3.3 STREET A	DDRESS	
CITY-SI-ZIP	<u> </u>		3.4. CITY-\$1		•	
TITLE		☐ DELE		4.1 TITLE		Change Addition
NAMÉ			- 1	4. 2 NAME	1	
STREET ADDRESS				4.3 STREET A	DORESS	
CITY-ST-ZIP				4.4 CITY-ST	- ŽIP	
TIFLE		DELE	TE	5 1 TITLE		☐ Change ☐ Addition
NAME			1	5.2 NAME		
STREET ADDRESS				5.3 STREET A	ddress	
CITY - ST - ZIP				5.4 CITY-ST	- ZIP	
TITLE		DELE		6.1 TITLE		Change Addition
NAME [6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		- 1	•
CITY - ST - ZIP				6.4 CITY-ST	ZIP	

14. I hereby certify that the information supplied with this filing 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, or on an attachment with an address.

SIGNATURE:

FLABALD UTKOD FRANKEL