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

PROFIT
CORPORATION
ANNUAL REPORT
1998 - 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JAN 25 PM 1:02
SECRETARY OF STATE
[redacted]

DOCUMENT # P97000025708

1. Corporation Name
CHOICES & ASSOCIATES, INC.

Principal Place of Business
6920 N. W. 44th COURT
LAUDERHILL, FL. 33319

Mailing Address
(SAME)

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/17/1997

2. Principal Place of Business
21 6920 N.W. 44th COURT
Suite, Apt. #, etc.
22
City & State
23 LAUDERHILL, FL.
Zip 24 33319 Country 25 U.S.A.

2a. Mailing Address
26 SAME
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number
65-0744159
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
HOWARD, WYLIE L. SR.
6920 N. W. 44th COURT
LAUDERHILL, FL. 33319

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
600002755656--6
-01/26/99--01100--019
****150.00 ****150.00
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 ✓ WYLIE L. HOWARD, SR. 01/22/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P,D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HOWARD, WYLIE L. SR.		1.2 NAME	600002755656--6	
STREET ADDRESS	6920 N.W. 44th COURT		1.3 STREET ADDRESS	-01/26/99--01100--020	
CITY-ST-ZIP	LAUDERHILL, FL. 33319		1.4 CITY-ST-ZIP	****150.00 ****150.00	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	600002755656--6	
STREET ADDRESS			3.3 STREET ADDRESS	-01/26/99--01100--021	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	******8.75 ******8.75	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
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, with all other like empowered.

SIGNATURE: ✓ SIGNATURE REQ. WYLIE L. HOWARD, SR. ✓ 1/22/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE