## 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 # P97000025987 (3)

MICHAEL H. STAUDER, P.A.

## FILED May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
CRYSTAL TREE OFFICE CENTRE CRYSTAL TREE OFFICE CENT 1201 US HIGHWAY ONE SUITE 315 1201 US HIGHWAY ONE SUITE				5		
	A BEACH FL 33408-3548	1201 US HIGHWAY ONE SUITE 315 NORTH PALM BEACH FL 33408-3548				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						03/17/1997
	lace of Business	2a, Mading Address				4. FEI Number Applied For
21		26				65-074/0/3 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27				Fee Required
City & Stat	е	City & State				6. Election Campaign Financing \$5.00 May Be
23		26				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No
24	25		30			
	g. Name and Address of Current	Registered Agent		B1	h la ma a	10. Name and Address of New Registered Agent
	AUDER, MICHAEL H			ן'י	Name	e
	RYSTAL TREE OFFICE CENTRE		ľ	62	Street A	et Address (P.O. Box Number is Not Acceptable)
	01 US HIGHWAY ONE SUITE 315					
NO	ORTH PALM BEACH FL 33408-354	8		83		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the at	ove	-named	
office or i عربه	registered agent, or both in the State of In familiar with and accept the obligat	I Florida. Such change was a Journal Buction 607, 305. Flo	iuthorized irida Stati	lby Jles.	the corp	od corporation submits this statement for the purpose of changing its registered or
SIGNATURE	-11/1/11/11/11	Mark				4/38/98
Standard printed decode region real desired defined applicable (NOTE: Regis				Agen	rt signature	ore required when reinstating) DAT
12.			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	OTALIDED MICHAEL II	DELETE	1.1 TITLE			PRESIDENT / TREASURER P/T Change Addition
NAME	ANY LAVE LIQUOE DONNE		1.2 NA	ME		MICHAEL H. STAUDER
STREET ADDRESS			1.3 ST	1.3 STREET ADDRESS		(Sane)
CITY-ST-ZIP				Y-S1	- ZIP	
TITLE	<del>S</del>	☐ DELETE	2.1 TITLE			Change Addition
NAME	THERESA L. STAYDER.	RESA L. STAMBER.		ME		
STREET ADDRESS	NORTH PALM BEACH, FL. 33408		2.3 \$1	2.3 STREET ADDRESS		8
CITY-ST-ZIP	NORTH PALM BEACH, FL. 33408			2.4 CITY-ST-ZIP		
TITLE	, L'] DELETE			3.1 TITLE		L Change L Addition
NAME			3.2 NAME			
STREET ADDRESS	DORESS			3.3 STREET ADDRESS		
CITY-\$T-ZIP		<u> </u>	3.4. CITY- S		I-ZIP	
TITLE	<del></del>			4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 N	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ADDRESS	5
CITY-ST-ZIP			4.4 CITY - S		-ZIP	
TITLE		☐ DELETÉ	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET		ADDRESS	s
CITY-ST-ZIP			5.4 CITY- S1		-ZIP	
TITLE		☐ DEL€TE	6.1 117	LE		☐ Change ☐ Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET A	ADDRESS	s
CITY-ST-ZIP			6.4 CI	Y-\$T	-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 any trachusen with an argress.

Aladas

(01/627-8899