FILED May 17, 1999 8:00 am Secretary of State

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05-17-1999 90090 028 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Considered First

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027345 (2)

| 1. CORPORA | GES IN ATTITUDE CHARTE | BC INO | | | | |
|---|--|-----------------------------------|------------------------------------|---|---|---|
| CHAN | GEO IN ALTITUDE CHANTE | no, inc. | | | | |
| | | | | | | |
| Propinel Pla | ce of Business | Ma lass A delassa | | | | |
| • | | Mailing Address | | | | |
| 1132 WATERVIEW LN. 1132 WATERVIEW LN. FT.LAUDERDALE FL. 33326 FT.LAUDERDALE FL. 33326 | | | | | | |
| 1 HANNES | WEE 16 00020 | FILMUDERLANDE PL 4400 | r u | | DO NOT WRITE IN THIS SP. | ACE |
| , | | | | | 3. Date incorporated or Qualified | |
| ′ | | | | | 03/26/1997 | |
| 2. Principal Place of Business 2s. Mailing Address | | 2s. Mailing Address | | | 4, FEt Number | Applied For |
| 21 26 | | 26 | | | 65-0152686 | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional |
| 27 27 | | | | | 5. Certificate of Status Desired | Fee Required |
| City & State | | City & State | | Election Campaign Financing \$5.00 May Be | | |
| 23 | | 28 | | Trust Fund Contribution Added to Fees | | |
| Zip |) | | Country | | This corporation owes or has paid the current year Intengible | |
| 24 | 28 29 30 9. Name and Address of Current Registered Agent | | 30 | | Personal Property Tax due June 30. Yes No | |
| | | ir Piegistered Agent | 81 | Name | 10. Name and Address of New Registered Ag | ent |
| 14 | RRARO, BRUCE J | | | Нали | | |
| 1132 WATERVIEW LN. | | | 82 | Street Addr | ess (P.O. Box Number is Not Acceptable) | |
| FT.LAUDERDALE FL 33326 | | | 83 | | | |
| | | | 63 | | | |
| | | | 84 | City | | 85 Zip Code |
| 44 Diseason | to the pre-injury of Paylors 607 050 | O - of COT 4500 Ft- id- O | | | FL I | |
| Office of | registered agent, or both, in the State | of Florida. Such change was a | es, the above-: authorized by t | named corp he corporati | oration submits this statement for the purpose of chion's board of directors. I hereby accept the appoint | langing its registered transfer as registered |
| agent. I e | em familiar with, and accept the obliga | stions of, Section 607.0505, Flo | orida Statutes. | | | |
| SIGNATURE | Signature typod or presided names of requirement again | and other included in the control | Continued to an | | ed when reinstating) (DATE | |
| 12. | OFFICERS AN | | 13. | signature require | ADDITIONS/CHANGES TO OFFICERS AND DI | DECTODE IN 12 |
| BITLE | 1 5 | DELETE | tatille . G | | | Change Addition |
| NAME | FERRARO, BRUCE J | | 1.2 NAME | 10 | -PRARO, LILIANA H. | , , - , - , - , - , - , - , - , - |
| STREET ADDRESS | 4466 1114 | | 1.3 STREET AL | ODRESS // | 2) WATERVIEW W | į. |
| CITY-ST-ZOF | FT.LAUDERDALE FL 33328 | | 14 CITY-ST- | 210 | ELRAPO, LILIANA H. 32 WATERVIEW W T CANDERSME, FI 33336 | |
| TITLE | | DELETE | 21 TIFLE | " | | Change Addition |
| NAME | | | 22 NAME | | Bangal | |
| STREET ADDRESS | | | 23 STREET AL | 223900 | | į |
| CITY-ST-ZIP | | | 2. 4 City-St- | | | Į |
| THLE | | DELETE | 3.1 TITLE | | . [1 | Change Addition |
| NAME | | | 3.2 NAME | 1 | | |
| STREET ADDRESS | | | 3.3 STREET AD | MARSS | | |
| CITY-ST-ZIP | | | 34 CHY-SI | 1 | | |
| TITLE | | ☐ DELETE | 41 THLE | | П | Change Addition |
| NAME | | | 4.2 NAME | | | |
| STREET ADDRESS | | | 43 STREET AD | DRESS | | ĺ |
| CITY-SY-ZIP | | | 4.4 CHY-ST- | ĺ | | İ |
| TITLE | | OCLETE | 5 1 HILE | | | Change Addition |
| NAME | | | 52 NAME | | _ | |
| STREET ADDRESS | | | 53 SIREET AD | ORESS | | Ì |
| CITY-ST-ZIP | _ | | 5.4 CITY - 51 - 2 | ` { | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | - | | Change Addition |
| NAME | | | 62 NAME | | | |
| STREET ADDRESS | | | 6 S STREET AD | DRESS | | ļ |
| CITY-ST. 70 | • | | | | | Ť |

14. Thereby certify that the information surplied 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_pr on an attachment with an address.

SIGNATURE:

SIGNATURE OF PRINTED HAVE OF SHOULD DEPOSED OF DIRECTOR

1/30/98

(934)354-1612 (heyrene Phone # 0200143

(954)384-7612