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

PROFIT
CORPORATION TANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027922 (8)

FINALE DEVELOPMENT, INC.

FILED May 18 1998 8:00am Secretary of State



Principal Place of		Mailing Address			
POST OFFICE E WEST PALM BE		POST OFFICE BOX 6905 WEST PALM BEACH FL 3:	3405		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					03/27/1997
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number Applied For Applied For
21		26			65 - 6738730 Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible
24	25 29 30			Personal Property Tax due June 30. Yes No	
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
CRAI	MMER, EDWIN L CPA		81	Name	
	4 WEST OAKLAND PARK BLV	D.	82 Street Ad		Address (P.O. Box Number is Not Acceptable)
STE 1 AUG	102 D e rhill fl 33319		83	3	
באטנ	PENTIFE I E COUTO		84	4 City	■■ 85 Zip Code
			•	City	FL 200000000000000000000000000000000000
office or red	the provisions of Sections 697.056 istered agent, or both, in the State familiar with, and accept the oblig	eo! Florida. Such ch anoe was a t	uthorized b	ov the corr	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	nature, typed or purifical name of registered ag				e required when reinstaling) DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 THILE		Change Addition
NAME			1 2 NAME	_	Christopher Addi 67 Mulberry St.
STREET ADDRESS			1.3 STREE	T ADDRESS	67 Hulberry St.
CITY-ST-ZIP			1.4 CHTY-		Plantsville, CT 06479
TITLE		DELETE	21 TITLE		T/S Change Addition
NAME			2.2 NAME		Patti Thompson
STREET ADDRESS			2.3 STREE	ET ADDRESS	22205D Bealancho W.
CITY-ST-ZIP			2. 4 CITY	- ST - ZIP	Born Rator FL 33428
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	ET ADDRESS	
CITY-ST-ZIP			3.4. CITY		
TITLE			4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAM	E	
STREET ADDRESS			4.3 STREE	F1 ADDRESS	
CITY-ST-ZIP			4.4 CITY	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	E1 ADDRESS	
CITY-ST-ZIP			5.4 CITY	ST-ZIP	
TITLE		DELETE 6.1			Change Addition
NAME			6.2 NAME	Ė	
STREET ADDRESS			6.3 STREE	E1 ADDRESS	
CITY-ST-ZIP			6.4 CITY	- ST- ZIP	
44 I beroby co	tify that the information supplied v	with this filing does not qualify for	r the evem	ntion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated or officer or di	r this annual report or supplement	at annual report is true and accu seiver or trustee emp <mark>owered</mark> to e achment with an address.	urate and t	hat my sic	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information greature shall have the same legal effect as if made under oath; that I am an s required by Chapter 607. Florida Statutes; and that my name appears in