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**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

P97000029457 (3)

**FILED** Apr 29 1998 8:00am Secretary of State

21 OFFICERS AND DIRECTORS  22 W. ATLANTIC Blue. 25  Suite, Apt. #, etc. 5. Certificate of Status Desired 58.75 Additing the composition of Status Desired 55. Certificate of Status Desired 65. Certificate of Sta	Applicable dditional uired May Be Fees ngible No
3550 BANKS ROAD SUITE 206 MARGATE FL 33063  2. Principal Place of Business 2. Principal Place	Applicable dditional uired May Be Fees ngible No  ode registered egistered
2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 3. FEI Number 65 - 07 4 9 6 8 Not Applied   Sulle, Apt. #, etc.   5. Certificate of Status Desired   8. Election Campaign Financing   7. Trust Fund Contribution   7. Trust Fund Contribution   7. Applied   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   7. Trust Fund Contribution   7. Addet to Fe Require   8. This corporation owes or has paid the current year Intangit   7. Added to Fe Require   8. This corporation owes or has paid the current year Intangit   7. Added to Fe Require   8. Trust Fund Contribution   8. This corporation owes or has paid the current year Intangit   7. Added to Fe Require   8. Trust Fund Contribution   8. This corporation owes or has paid the current year Intangit   8. Trust Fund Contribution   8. Trust Fund Contribution   9. Name and Address of Now Registered Agent   9. Street Address (P.O. Box Number is Not Acceptable)   9. Street Address (P.O. Box Number is Not Acceptable)   9. Trust Fund Contribution   9. Added to Fe Require   9. Added to Fe Require   9. Added to Fe Require   9. Address of Now Registered Agent   9. Address of Now Registered Agent   9. Address of Now Registered Agent   9. Address of Now Regis	Applicable dditional uired May Be Fees ngible No  ode registered egistered
2. Mailing Address 3. Mailing Ad	Applicable dditional uired May Be Fees ngible No  ode registered egistered
21 OFFICERS AND DIRECTORS  22 W. ATLANTIC Blue. 25  Suite, Apt. #, etc. 5. Certificate of Status Desired 58.75 Additing the composition of Status Desired 55. Certificate of Status Desired 65. Certificate of Sta	Applicable dditional uired May Be Fees ngible No  ode registered egistered
Suite, Apt. #, etc.    Suite, Apt. #, etc.	dditional suired  May Be Fees Ingible No  ode  registered egistered
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City & State  23	May Be Fees Ingible No  ode registered egistered
Trust Fund Contribution Added to Fe Zip Country Zip Country Added to Fe Zip Country Zip Country Registered Agent 8. This corporation owes or has paid the current year Intangit Personal Property Tax due June 30. Yes Zi No  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10.	ngible No  ode registered egistered
ZIP Country 25 U50 29 30 8, This corporation owes or has paid the current year Intangit Personal Property Tax due June 30. Yes 2 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10.	ngible No ode registered egistered
24 33069 25 US// 29 30 Personal Property Tax due June 30. Yes No. 29 9. Name and Address of Current Registered Agent  ABRAMSON, EDWARD J ESO 7270 N.W. 12TH STREET SUITE 580 MIAMI FL 33128  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reg 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 registagent. I am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title diapplicatio (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  PSD  ORLANDO, MARIO RAMON  STREET ADDRESS  4042 COCOPLUM CIRCLE  CITY-ST-ZIP  COCONUT CREEK FL 33083	ode registered egistered
ABRAMSON, EDWARD J ESQ 7270 N.W. 12TH STREET SUITE 580 MIAMI FL 33128  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Vip Code  11. Pursuant to the provisions of Soctions 507.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reg 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  PSD	registered egistered
ABRAMSUN, EDWARD J ESU 7270 N.W. 12TH STREET SUITE 580 MAMI FL 33126  82 Street Address (P.O. Box Number is Not Acceptable)  83 ACRES (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Zip Code  86 City  FL 87 Zip Code  87 Zip Code  88 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  99 Zip Code  99 Zip Code  99 Zip Code  11. Pursuant to the provisions of Soctions 607.0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reg 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  81GNATURE  81GNATURE  81GNATURE  81GNATURE  91 Zignature, typed or printed name of registered agent and title it applicable.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	registered egistered
7270 N.W. 12TH STREET SUITE 580 MIAMI FL 33126  82 Street Address (P.O. Box Number is Not Acceptable)  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 reg 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed remix 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 ITILE  PSD  ORLANDO, MARIO RAMON  SIREET ADDRESS  4042 COCOPLUM CIRCLE  CITY-SI-ZIP  COCONUT CREEK FL 33083  14 CITY-SI-ZIP  NAME  ARROATE FL 83063	registered egistered
SUTE 580 MIAMI FL 33128  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 reg 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ITILE  PSD  ORLANDO, MARIO RAMON  STREET ADDRESS  4042 COCOPLUM CIRCLE  CITY-ST-ZIP  COCONUT CREEK FL 33083  1.4 CITY-ST-ZIP  NAME  OCCONUT CREEK FL 33083  AND CITY-ST-ZIP  NAME  OCCONUT CREEK FL 33083  AND CITY-ST-ZIP  NAME  NAME  ORLANDO, MARIO RAMON  1.3 STREET ADDRESS  NARCATTE FL 83063	registered egistered
MIAMI FL 33126  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 reg 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed remix 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 ITILE  PSD  ORLANDO, MARIO RAMON  STREET ADDRESS  4042 COCOPLUM CIRCLE  CITY-ST-ZIP  COCONUT CREEK FL 33083  1.4 City-ST-Zip  NARCATTE FL 83063	registered egistered
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SIGNATURE    Signature, typed or printed name of registered agent and the it applicable.   (NOTE Registered Agent bignature required when reinstating)   DATE     12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	IN 12
Signature, typed or printed name of registered against and their applicable.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE PSD  NAME  ORLANDO, MARIO RAMON  STREET ADDRESS  4042 COCOPLUM CIRCLE  CITY-ST-ZIP  COCONUT CREEK FL 33083  NOTE Registered Agent signature required when reinstating)  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN PSD  ORLANDO, MARIO RAMON  1.2 NAME  1.3 STREET ADDRESS  3350 ARNKS RD. 44 906  NARCATE TL 33063	
DELETE 1.1 TITLE PSD Change Change  MAME ORLANDO, MARIO RAMON  STREET ADDRESS 4042 COCOPLUM CIRCLE  CITY-ST-ZIP COCONUT CREEK FL 33083  DELETE 1.1 TITLE PSD CHANCO, MARIO RAMON  1.2 NAME ORLANDO, MARIO RAMON  1.3 STREET ADDRESS 3550 & RNKS RD. 44 206  1.4 CITY-ST-ZIP MARCATE FL 33063	
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CITY-ST-ZIP COCONUT CREEK FL 33083 14 CITY-ST-ZIP MARGATE FL 93069	
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NAME ORLANDO, MIREYA J  STREET ADDRESS 4042 COCOPLUM CIRCLE 23 STREET ADDRESS 3350 BANKS RD. # 20 G	
CITY-ST-ZIP COCONUT CREEK FL 33063 2.4 CITY-ST-ZIP HARGATE FL 33063	TARRES.
	Addition
NAME 32 NAME	
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