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

PROFIT CORPORATION



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

FILED Jun 08 1998 8:00am Secretary of State

ANNUAL REPORT			Secretary of Ctate DIVISION OF CORPORATIONS			h	Secretai	y or k	rau	J	
1. Corporation	OIT I VENTRE.	P9700032 AND ASSOCIATED	• • •	S, I	MA TAN	1.000	. 193 - 1941 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944	RIJA Bajaa jini a 1 186 ji	1881 8 1188 5111 (1531	
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Principal Place of Business			Mailing Address			1.00					
304 SABAL PALM BEAC	P alm Lane H Gar dens FL 33418		SABAL PALM LANE .M BEACH GARDENS	FL 33418		ļ					
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}						l l	rporated or Qualified			-	
2. Principal 8	Place of Business	2a. N	failing Address			04/08/ 4. FEI Numb			(Applied	For	
21		۱۰۱	[26]				140904	}-	Not Appl		
Suite, Apt	. #, etc:		Suite, Apr. #, etc.				of Status Desired	1 1 ' -	75 Additio	I	
22		27	\$ **- \$						ee Required		
City & Sta	(10	28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Cour		тр	Count	ry		oration owes or has pa				
24	25	29		30	•	1 '''	Property Tax due June		☐ No	٠	
	_ 	dress of Current Registe	red Agent				d Address of New Re	gistered Agent			
	DX, R OBERT H			a	1 Name					J	
	4 SABAL PALM LAI			8:	2 Street	Address (P.O. Box N	umber is Not Acceptal	ble)	··		
PA	ALM BEACH GARDE	:NS FL 33418		8	3						
•								·			
				8	1 City			FL 85	Zip Code	- 1	
office or	registered agent or bo	ections 607.0502 and 607 oth, in the State of Horida ocept the obligations of S	Such change was a	authorized b	by the co	f corporation submits poration's board of di	this statement for the prectors. I hereby acce	ourpose of chang pt the appointme	ing its regis nt as registe	stered ered	
SIGNATURE										\	
12.	Signature, typed or printed is	and of registered agent and briefle OF LICERS AND DIRECT		13.	gent signatui	e required when reinstating) ADDITION:	S/CHANGES TO OFFIC	DATE CERS AND DIREC	TORS IN 1	6	
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14. Thereby 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 suppliemental 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, by on all attaching with an address

SIGNATURE:

29 Anc. 198 56/1691-4857