## 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 # P97000036836 (9)

## FILED Apr 09 1998 8:00am Secretary of State

1. Corporation FLOOD	n Name WATCH,		, 000000	<i>.</i> ,			
Principal Place	e of Busine	SS	Mailing Address				
2050 NW 23RD WAY  -BOCA RATON FL 33431						DO NOT WRITE IN THIS	S SPACE
						3. Date Incorporated or Qualified	
						04/24/1997	
2. Principal P			2a. Mailing Address	Ella chana	84VD	4. FEI Number	Applied For
21 / <b>300</b> Suite, Apt.		1/sboro BLVD	26 / 300 E. /		DAYD		Not Applicable \$8.75 Additional
22 205	, 010.		27 <b>205</b>	·		5. Certificate of Status Desired	Fee Required
23 Deer H	old i	Beach	28 Deer lield	Beach		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zale	LV	Country	Z 221111	Country	40>	8. This corporation owes or has paid the co	urrent year Intangible
24 <i>7777</i>	1	25 Provare	29 27771	30 010	ard	Personal Property Tax due June 30.	Yes No
		e and Address of Currer	t Registered Agent	81	Namo a	10. Name and Address of New Registered	Agent
HEAU, IRUMAN A						harles book	
BOCA RATON FL 33431					Street Add	tress (P.O. Box Number is Not Acceptable)  Hills boro Sun Suite	205
				84	CityDa	erfield Boach FI	85 Zip Code 1
office or re agent. I as SIGNATURE	egi <b>ste</b> red a m <b>la</b> miliar v	gent, or both, in the State with, and accept the obligation	of Florida. Such change values of, section 607,050	was authorized by 5, Florida Statutes	-named cor the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
	Signature, type	d or printed name of registered age OFFICERS AN		(NOTE: Registered Age	nt signature requ		(0 D)DEGTODO IV. 40
TITLE	D	OFFICENS AIN	DELETE	13. 1.1 TITLE	175	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	_	THOMAS A	F	1.2 NAME			/ ·
STREET ADDRESS	AARA ANII AARR IIIII			1.3 STREET	ADDRESS	ADD E. Hillsbord Blud. 312	205
CITY-ST-ZIP	5001 517011 51 4414			1.4 CITY - ST	r-zip	Deerfield Beach, FL 334	4/
TITLE			☐ DELETE				Change Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET	ADDRESS		
CITY-ST-ZIP				2. 4 CITY - S	T-21P		
TITLE	İ		☐ DELETE		ļ		☐ Change ☐ Addition }
NAME				3.2 NAME			İ
STREET ADDRESS				3.3 STREET			
CITY-ST-ZIP TITLE			☐ DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP		Change Addition
NAME				4. 2 NAME			C cuantite C vacuum
STREET ADDRESS				4.3 STREET	AUUDEGG		
CITY-ST-ZIP				4.4 City-St			/ /
TITLE	······································		DELETE			<i>1</i>	Change Addition
NAME				5.2 NAME	ľ	///	1//0
STREET ADDRESS			5.3 STREET	ADDRESS	$\hookrightarrow$	14/4	
CITY-ST-ZIP				5.4 CITY - ST	- <b>2</b> IP	// .	14 /
TITLE				6.1 TITLE		5000024545 -04/10/98010030	Change Addition
NAME				6.2 NAME		04/10/98010030	17
STREET ADDRESS				6.3 STREET	ADDRESS	***158 <b>.</b> 75	
CITY-ST-ZIP			71-71-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	6.4 CITY-ST		0	
14. I hereby c	ertify that the	ne information supplied w	ith this filing does not qual	lify for the exempt	ion stated in	n Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information

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 an attachment with an address.

CIONATURE.

horlas B Czok

3-19-98 426-497