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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

Feb 17 1998 8:00am

	1998			DIVISION OF CORPORATIONS					Secretary	OI	State
DOCU 1. Corporation			970000 L GROUP, IN	45794 (9 c.	9)	*					
J = 1111											
Principal Plac	ce of Busines	s		Mailing Address				$\dashv$	1   <b>                                   </b>		DAN DIDI NADI
2499 GLADES RD., STE. 109 BOCA RATON FL 33431				2499 GLADES RD., STE. 109 BOCA RATON FL 33431							
								ļ	DO NOT WRITE IN THIS	SPACE	
								3.	Date Incorporated or Qualified 05/22/1997		
2. Principal Place of Business				2a. Mailing Address			4.	FEI Number		pplied For	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			<del> </del>	03 0113075		Not Applicable Additional	
22				27			5.	. Certificate of Status Desired		Pequired	
City & State				City & State			6.	Election Campaign Financing  Trust Fund Contribution		May Be to Fees	
Zip	<del>-</del>	Country		Zip	Cour	ntry		R.	This corporation owes or has paid the c		
24		25		29 30					Personal Property Tax due June 30.	Yes [	☐ No
	<del></del>		ss of Current Reg	jistered Agent		81	Name 1	10.	Name and Address of New Registered	i Agent	
	ENTIL KEVIN		CTC 200			82		XI	ZELLER		
5551 <b>RIDGEWO</b> OD DR., STE. 302 NADLES FL 34108							Street Addre	ess (P	P.O. Box Number is Not Acceptable)	. 109	
7	<b>, , , , , , , , , , , , , , , , , , , </b>	N				83	20	<u> </u>	RATON	<del></del>	
						84	City	-47		<b>85</b> Zip	Code
44 Pursuant	to the provid	ons of Secti	ons 607 0502 and	1607 1508 Florida Sta	itutes the ab	000	-named coro	oralio	on submits this statement for the nurrose		its registered
office or	registere ag	en/, or <b>b</b> eth, the and acce	ip the State of Flo	orida. Such change was of Section 607 0505	as authorized Florida Stati	l by des	the corporation	on's b	on submits this statement for the purpose board of directors. I hereby accept the ap	pointment as	s registered
SIGNATURE	//WW	UM Y	V		rionad olaic	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				
	gnature, typed		of registered agent and I			Agen	of signature require		······································		
12.	<u>.</u>		FICERS AND DIR	DELETE	13.	ı F			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change	HS IN 12 Addition
NAME	ZELLER,	LORI		عاديدات	1.2 NAI					Vilanga بي	radition
STREET ADDRESS			STE. 109				1.3 STREET ADDRESS				
CITY-ST-ZIP		ATON FL			1,4 CIT	Y-ST	- ZIP				
TITLE				☐ DELETE	2.1 1(1)	LE				☐ Change	Addition
NAME					2.2 NA	ΜE					
STREET ADDRESS					2.3 STR	REET #	ADORESS				
CITY-ST-ZIP				DELETE	2 4 C/I		i - ZIP		· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
	·			_ Ottere	3.1 TITI 3.2 NAF					Unange	☐ Audition
NAME STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					3.4. Cit		1				
TITLE	<u> </u>		<del></del>	DELETE	4 1 1111					Change	Addition
NAME					4. 2 NA	ME					
STREET ADDRESS					4.3 STA	IEET A	NDDRESS				
CITY-ST-ZIP					4.4 Cit	Y-SI	- ZIP				
TITLE				DELETE	5.1 TITL	£				Change	Addition
NAME					5.2 NAM						
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	<del></del>	· ·		☐ DELETE	5.4 CIT		- ZIP			Change	☐ Addition
TITLE				Ottele						LL CHANGE	L AUDIDA
NAME OTDEET ABODESO					6.2 NAM	nt 					

CITY-ST-ZIP 14. 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 eath; that I am an officer or director of the corporation or the report 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 carried, or on an endachment with an address.