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 # P97000048774 (8)

BOHM-LEVY ENTERPRISES #30, INC.

		,							
Principal Place of Business Mailing Address								1 81891 (818) 18414 18	Bit nist 1861
555 N.W. 62ND STREET 555 N.W. 62ND STREET									
FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 333							DO NOT MIDITE IN T	UD ODAOE	
							DO NOT WRITE IN T	HIS SPACE	
							 Date Incorporated or Qualified 06/02/1997 		
2. Principal Place of Business 2a. Mailing Address							4. FEI Number	A	pplied For
21 26							65-075-6168	N	ot Applicable
Suite, Apt. #, etc.							5. Certificate of Status Desired		Additional
27 City & State City & State									equired
h-g '							Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country Zip			Country					to Fees
24	25 29 30		─ `			Personal Property Tax due June 30.	corporation owes or has paid the current year Intangible		
	9. Name and Address of Cur			301			10. Name and Address of New Registe		<u> </u>
LE				81	Name				
LEVY, SHARON 555 N.W. 62ND STREET									
FORT LAUDERDALE FL 33309					Street	Addres	ress (P.O. Box Number is Not Acceptable)		
1	III CTODENDALL IL DODDO			83	 				
					-			1213.	
				84	City		:	FL 85 Zip	Code
11. Pursuant	0502 and 607.1508.	s, the abov	е-патес	corpo	ration submits this statement for the purpo	se of changing i	its registered		
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 registered 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 registered agent, a milliar with, and accept the obligations of, Section 607.0506, Florida Statutes.									
SIGNATURE									Ì
SIGNATURE	Signature, typed or printed name of registered		(NOTE	Registered Ag	ent signature	e required	when reinstating) DA		
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	D DELETE			1.1 TITLE		00	ESIDENT	Change	Addition
NAME LEVY, SHARON				1.		11/0			\;
STREET ADDRESS	DOMPANO DEACH EL DOGGO			1.3 STREET ADDRESS					
CITY-ST-ZIP	POMPANO BEACH FL 330		A Driver	1.4 CITY- :	ST-ZIP			FT 65	
TITLE	D DELETE			2.1 TITLE		}		Change	Addition (
NAME	LEVY, MARVIN 88 804 CYPRESS GROVE LANE BLDG. 123 #210				2.2 NAME				
DOMPANO DEACH EL 20000				1	2.3 STREET ADDRESS				
CITY-ST-ZIP	TOMPANO DEACH PL 330		DELETE	2.4 CITY-	ST-ZIP	 -		Change	Addition
TITLE	i utti			3.1 TITLE				— Change	LL ABUNION
NAME OTREST ADORESC				3.2 NAME	* 4000000				
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP TITLE			DELETE	3.4. CITY- 4.1 TITLE	S1-ZIP	}		Change	Addition
NAME		L	000,10	4.1 117LE 4. 2 NAME		1		C Ollanine	
STREET ADDRESS					T ADDRESS	1			Ţ
CAY-ST-ZIP				4.4 CITY-					1
TITLE			DELETE	5.1 TITLE	31. TIL.	 		Change	Addition
NAME		-	-	5.2 NAME		1			_
STREET ADDRESS				5.3 STREET	r annress	1			ì
CITY-ST-ZIP				5.4 CITY~		1			ļ
TITLE		T.	DELETE	6.1 TITLE	D1 - 411	+		Change	Addition
NAME				6.2 NAME				 • •	
STREET ADDRESS					T ADDRESS]			1
CHECK ADMILES				O.D OTALL	. ,				

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 together 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 emprewered 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.

SIGNATURE:

Theron James of Come

3-31-98

954-970-9162

FILED

Apr 06 1998 8:00am

Secretary of State