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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000049594 (9)

DONCO ASSOCIATES, INC.

22467 ARCADIA COURT BOCA RATON FL 33433	22467 ARCADIA COURT BOCA RATON FL 33433	±
2. Principal Place of Business	2a. Mailing Address	F +
21	26	ī.
Cuita Ant # ata	Cuito Ant # ata	

FILED Jan 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/05/1997 Applied For 1 65-075 9003 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 AMERILAWYER CHARTERED 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 City 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELETE Change TITLE 1.1 TITLE NAME FRIEDMAN, SHELDON 1.2 NAME STREET ADDRESS 22467 ARCADIA COURT 1.3 STREET ADDRESS **BOCA RATON FL 33433** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 2,1 TITLE TITLE NAME SILBERT, SHELDON 2.2 NAME 22467 ARCADIA COURT STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33433** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME. 4.3 STREET ADDRESS STREET ADDRESS CITY - ST- 2IP 4.4 CITY - ST - ZIP TT Change DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME 5,3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 13 if chaptered to me an extrement with an address. iged, or on an attachment with an address.

SIGNATURE:

10-98 5614170231

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