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 # P97000050388 (2)

ALOFS & RUSSO, P.A.

FILED
Jan 28 1998 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address		- I IBAHADA AID LOULI IDBII OBIII ODIIA ODAA DOLID OO	INNA ODADO NADI IDIDI HDA HUMA
580 VILLAGE BLVD		580 VILLAGE BLVD			
SUITE 260		SUITE 260			
WEST PALM BEACH FL 33409 WEST PALM		WEST PALM BEACH FL 3	3409	DO NOT WRITE IN THIS	SISPACE
				 Date Incorporated or Qualified 06/06/1997 	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	4 -1-	26		65-0759433	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country		Added to Fees
24	25	⊢	30	 This corporation owes or has paid the corporation of the personal Property Tax due June 30. 	urrent year intangible
	g, Name and Address of Cu	rrent Registered Agent	<u> </u>	10. Name and Address of New Registered	
ALOFS, TODD C ASH 81 Name					
580 VILLAGE BLVD			82 Street Add	/DO D. M	
SUITE 260			62 Street Abd	ress (P.O. Box Number is Not Acceptable)	
WEST PALM BEACH FL 33409			83		
			84 City	Fi	85 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 trile if approximate (NOTE: Registered Agent signature required when reinstating) DATE					
12,		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	ADDITION OF TANGED TO OF TOLING AN	Change Addition
NAME	ALOFS, TODD C		1.2 NAME		
STREET ADDRESS	580 VILLAGE BLVD SUITE	260	1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3	3409	1.4 CITY-ST-ZIP		
TITLE	D	DELET E	2.1 TITLE		☐ Change ☐ Addition
NAME	RUSSO, GARY		2.2 NAME		
STREET ADDRESS	580 VILLAGE BLVD SUITE	260	2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3	3409	2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY-ST-ZIP		İ
TITLE		☐ DELETE	4.1 TOTLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP			5.4 CiTY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City-St-ZIP		
4 - 41	44 4 44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				

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 trusfee 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.

1.04/1/

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