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

**PROFIT** CORPORÁTION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P97000050416 (1)

TODD A. SADACCA, P.A.

## **FILED** May 20 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
1554 N.E. 105		1554 N.E. 105TH STREET				
MIAMI SHORES FL 33138		MIAMI SHORES FL 33138				DO NOT WRITE IN THIS SPACE
}						3. Date Incorporated or Qualified
						06/09/1997
2. Principal Place of Business 2a. Mailing Address					· · · ·	4. FEI Number Applied For
21	add of Celamodo	26				65 07 57 376 Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.				60.75
22	.,, 410.	27				5, Certificate of Status Desired Fee Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible
24	25	29	30	•		Personal Property Tax due June 30. Yes No
1-11	Name and Address of Current Registered Agent		1423			10. Name and Address of New Registered Agent
SADACCA, TODD A				81	Name	
AREA M.E. ADETH OTDECT				-	0	11
,	AMI SHORES FL 33138		82 Street Ad		Street Add	ddress (P.O. Box Number is Not Acceptable)
in the same	am Gronzo i E 00100		ŀ	83		
}			Į			
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607 050:	2 and 607 1508 Florida State	utes, the ab		-named cor	progration 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.						
agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typind or priviled name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
12,	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVST	DELETE	1.1 TO	ιŧ		Change Addition
NAME	8101001 T000 1		1.2 NA	ME		
STREET ADDRESS	ARRADIC ARREST OFFICE		1.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	ANAMI CHOPEC EL COACO			1.4 CITY-ST-ZIP		
TITLE	D					Change Addition
NAME	ALDAGOL TODD A		2 2 <b>N</b> A	ME		-
STREET ADDRESS	1554 N.E. 105TH STREET		2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	MIAMI SHORES FL 33138		2. 4 CITY-ST-ZIP			
TITLE			3.1 TIT		<u>' - "                                  </u>	Change Addition
NAME		_	32 NAME			_ · <b>_</b>
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		}	
TITLE		DELETE				Change Addition
NAME			4. 2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 CIT			
TITLE		DELETE	5.1 TIT		- 414	☐ Change ☐ Addition
NAME			5.2 NA			The strength of the strength o
STREET ADDRESS					NDDDEGC	
1 1					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TIT		- 207	Change Addition
		f" netric				Crianife Tytoningi
NAME			6.2 NAI		-	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y-\$1	- <b>Z</b> IP	

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.

1 20 1998