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 #

P97000052000 (1)

SETH KIMMEL, P.A.

FILED Apr 10 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		a sandinds iin tacit tabli dalit natit natit dalit dalit	(10 11411 Abite Bols) Abit (Abi	
8551 W SUNF	RISE BLVD	8551 W SUNRISE BLVD				
SUITE 100A SUITE 100A			DO NOT WRITE IN THIS SPACE			
FT LAUDERDALE FL 33322 FT LAUDERDALE FL 33322			3. Date Incorporated or Qualified	O AOL		
				06/11/1997		
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 832	o W. Sugrise Blud	26 8320 W. Sun	rih Blud.	65-0769755	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 203		27 203		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
	ation, FL	28 Plantation FL	Country	Trust Fund Contribution	Added to Fees	
Zip 24 3332	Country 25 Bruch	Zip 29 33322 3	Country Broward	8. This corporation owes or has paid the c	urrent year Intangible No	
24 3332	9. Name and Address of Current		0 Broward	Personal Properly Tax due June 30. 10. Name and Address of New Registered		
KIM	AMEL, SETH		81 Name	10. Mains and Mains of Main Magneton	. Agom	
NIMICA, DELTA						
	ITE 100A		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	LAUDERDALE FL 33322		83			
				203	Inc. 2:- Code	
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	tation Fi	L 85 Zip Code 3333.22	
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 agont		Registered Agent signature requ			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D Kimmel, Seth	DELETE	1.1 TITLE		Change Addition	
NAME	8551 W SUNRISE BLVD 100A		1.2 NAME			
STREET ADDRESS	FT LAUDERDALE FL 33322		1.3 STREET ADDRESS		ļ	
CITY-ST-ZIP TITLE	TI DAUDERDALL TE 35322	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			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			
TITLE		DELETE	4.1 TITLE		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		Ì	
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADORESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		01.2	6.4 CITY - ST - ZIP			

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 adactiment with an address.

STA Change

4/1/91

954.374.7200