		•				e e e e e e e e e e e e e e e e e e e	* *		
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						FILED			
COF	CORPORATION Sand			DEPARTMENT OF STATE dra B. Mortham ecretary of State		Apr 13 1			
	1998 DIVISION OF CORPORATIONS					Secretary of State			
 Corporation 	MENT # CALL, INC.	P970000	53873 (0)						
Principal Place	e of Business		Mailing Address	 		- I TORIORAS IND 10145 MODIN ORISI DOLIS O	IBIH BDIBI BILBE I	ANDRI PURAL PUDI	00 IIII 10 <u>0</u> 1
9701 N. 47TH HOLLYWOOD		3701 N. 47TH AVE. HOLLYWOOD FL 33021			DO NOT WRITE	E IN THIS SP	ACE		
						3. Date Incorporated or Qualified			
2. Principal P	lace of Business	<u> </u>	a. Mailing Address	1) },		06/18/1997 4. FEI Number		- I Apr	plied For
1 8910	Miramar	Parkway 21	6 8910/11ica	uar 101 Kwa	24	65-076212	<u> </u>		Applicable
2 5014	e 208	J	3 Suite 200	8	J	6. Certificate of Status Desired		\$8.75 A Fee Rec	
a Wisco	amar, FI	21	State Mar,	FL	,	Election Campaign Financing Trust Fund Contribution		\$5.00 i	
² 3302	5 25 /	intry)5A 21	33625	Country A		This corporation owes or has personal Property Tax due June	~~	year Inta	
	9. Name and Ad GEL, MICHAEL	dress of Current Rec	·	81 Name		10. Name and Address of New Re			110
HC	01 N. 47TH AVE.		COT 1509 Florida Const	83 84 City		ss (P.O. Box Number is Not Accepta	FL	85 Zip C	
SIGNATURE	with and a	accupi the obligations	oi, section 607.0505, Fid	noa Statutes.		ration submits this statement for the n's board of directors. I hereby acce		nanging its	registered egistered
12.	Signature, typed or printed r	iame of registered agent and the OFFICERS AND DIR		Registered Agent signature 13.	e required	when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND D	IRECTORS	S IN 12
TITLE NAME	D SIEGEL, MICH/		☐ DELETE	1.1 TITLE 1.2 NAME	4			Change	Addition
STREET ADDRESS CITY+ST+ZIP	3701 N. 47TH . HOLLYWOOD I			1.3 STREET ADDRESS	İ				
TITLE			DELETE	1.4 CHY-ST-ZIP 2.1 TITLE	D,	V .	L	Change	Addition
NAME				2.2 NAME	Ro	hald 5. Schnell \$55 W 13th Street	1	•	
STREET ADDRESS				2.3 STREET ADDRESS	173	1855 W 1315 541ec7			
CITY-ST-ZIP TITLE			☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	1	abroke fines, FL	53027	Change .	Addition
HAME				3.2 NAME	Sar	dra G. Sloane			
STREET ADDRESS				3.3 STREET ADDRESS	162	11 Cranberry Court	٢		
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NAME			ted Deter	4. 2 NAME			Ļ	1 Auguste	ROUIDIT
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP	·····		SELETE	4.4 CITY-ST-ZIP	<u> </u>			1.00	—
TITLE Name			☐ DELETE	5.1 TITLE 5.2 NAME			L] Change	L. Addition
STREET ADDRESS				5.3 STREET ADDRESS					
CITY.ST.7IP				SACITY OF 74D					

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 deceiver 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 a signature with an address.

SIGNATURE:

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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TITLE

NAME

STREET ADDRESS

DELETE

Change

Addition