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 # P97000058794 (3)

HEAD PROPERTY CORPORATION

FILED Feb 04 1998 8:00am Secretary of State



Principal Place	o of Business	Mailing Address				
•		2650 NW 23RD WAY				
2650 NW 23RD WAY 2650 NW 23RD WAY BOCA RATON FL 33431 BOCA RATON FL 33431			Ħ	DO NOT WORK	T 141 T 110 CD 1 CF	
				3. Date Incorporated or Qualified	E IN THIS SPACE	
				'		
9 Principal Pl	ace of Business	2a. Mailing Address	<u> </u>	07/07/1997 4. FEI Number	Apr	olied For
21 - THICEPAIT	ace of business	26		65-0736803		Applicable
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.			CO 75 A	
22		27		5. Certificate of Status Desired	Fee Req	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 N	May Be
23		28		Trust Fund Contribution	Added to	•
Zip	Country	Zip	Country	8. This corporation owes or has p		
24	25	29	30	Personal Property Tax due Jun		No
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New R	egistered Agent	
HE/	AD, THOMAS A		81 Na	ame		
2850 NW 23RD WAY BOCA RATON FL 33431			82 Str	reet Address (P.O. Box Number is Not Accepta	able)	
			83			
			B4 Cir	tv	85 Zip C	ode
			1 1 -	med corporation submits this statement for the	FL	
SIGNATURE	Signature, typed or printed name of registered OFFICERS A	agent and lets if applicable (N AND DIRECTORS	NOTE: Registered Agent sig	nature required when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS	S IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change	Addition
NAME	HEAD, THOMAS A		1.2 NAME			
STREET ADDRESS	2650 NW 23RD WAY		1.3 STREET ADDR	RESS .		
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY-\$T-ZIP			
TITLE		DELETE	2.1 TITLE	Secretary Rita B. Head	☐ Change	Addition
NAME			2.2 NAME	Rita B. Head		
STREET ADDRESS			2.3 STREET ADDR	188 2650 N.W.Z3 W.	4	
CITY-ST-ZIP			2. 4 CITY-ST-ZIF	Boca Roton, Ha.	224.21	
TITLE		☐ DELETE	3.1 TITLE		∐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDR	IESS		
CITY-S1-ZIP		Const	3.4. CITY-ST-ZIF	,	Change	Addition
TITLE		DELETE	4.1 TITLE		□ cuantis	AUGRIDIT
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDR			
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		☐ Change	Addition
TITLE		☐ DECEIE	5.1 TITLE		□ outlinge	Roomon
NAME			5.2 NAME	prec		
STREET ADDRESS			5.3 STREET ADDR			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change	Addition
			6.2 NAME			
NAME			6.3 STREET ADDR	arcc		
STREET ADDRESS			6.4 CITY - ST - ZIP			
CITY-ST-ZIP	cartify that the information supplied	with this filing does not qualif	v for the exemption	stated in Section 119.07(3)(i). Florida Statutes.	I further certify that the i	information
Indicated	on this conveil topost or europiomo	intal annual report is true and a eceiver or trustee empowered	accurate and that m	by signature shall have the same legal effect as ort as required by Chapter 607, Florida Statutes	: It made under barn, inat	riaman