

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000065636 (7)

1. Corporation Name

ONA R. CHARVET ENTERPRISES, INC.



Principal Place of Business

Mailing Address

9518 SW 1 CT
CORAL SPRINGS FL 33066
90 MAY ROTHCHILD
3000 N.W. 42 AVE
BLDG B APT 108

9518 SW 1 CT
CORAL SPRINGS FL 33066

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 90 MAY ROTHCHILD	26 3000 NW 42 AVE	07/29/1997
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22 BLDG B APT 108	27 TRADING	25-6767116
City & State	City & State	Applied For
23 COCONUT CREEK	28 FLORIDA	Not Applicable
Zip	Zip	5. Certificate of Status Desired
24 33066	29 33066	8.75 Additional Fee Required
Country	Country	6. Election Campaign Financing
25 BROWARD	30 BROWARD	Trust Fund Contribution
		5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.
		Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHARVET, ONA R
9518 SW 1 CT
CORAL SPRINGS FL 33066

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 90 ROTHCHILD 3000 NW 42 AVE
84 BLDG B APT 108 TRADING
85 City COCONUT CREEK FL 85 Zip Code 33066

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DELETE	1.1 TITLE	Change Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DELETE	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	
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	

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.

SIGNATURE

ONA R. CHARVET

4-29-98

CR2E034 (10/97)