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

PROFIT CORPORATION ANNUAL REPORT **1998** DOCUMENT,#

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Zip

Sulte, Apt. #, etc

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000065926 (2)

Principal Place of Business	Mailing Address		
•	· ·		
11461 NW 5TH STREET PLANTATION FL 33325	11461 NW 5TH STREET PLANTATION FL 33325		
2. Principal Place of Business	2a. Mailing Address		

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Country

9. Name and Address of Current Registered Agent

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Jarvis, Judith A 11461 NW 5TH STREET

PLANTATION FL 33325

Suite, Apl. #, etc.

City & State

 $Z_{(p)}$

FILED May 06 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/30/1997 4. FEI Number Applied For 65-077054 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. □ No 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Zip Code

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

Country

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agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Storature, typical or printed name of registered agent and title if by ficiable (NCFL 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	JARVIS, JUDITH A	1.2 NAME				
STREET ADDRESS	11461 NW 5TH STREET	1.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33325	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	į			
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				

Thereby 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.

CIGNATURE:

Julio a

4/11/98

954-452-2007