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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000070484 (5)

WAYNE SCHRAILBMAN & ASSOCIATES, INC.

FILED Apr 27 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address									T 1901:100: 110 ibiti Sabii galli balir balir dalii sabii balir alan 1951: 910 ibil				
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DAVIE FL 33325				DAVIE FL 33325									
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									3. Date Incorpora		1]
									08/11/1997	,			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number	4 0		L A	pplied For
21			26						65-077	3464		<u> </u>	ot Applicable
Suite, Apt.	#, etc.		⊢ ¬	Suite, Apt. #, etc.					5. Certificate of S	tatus Desired			Additional
22	_			27								Fee H	lequired
City & State	9		⊢ ¬	City & State					6. Election Camp		_		May Be
23		0	28						Trust Fund Cor				to Fees
Ζιρ		Country	—	Zip	—	untry	•		8. This corporation				
24		5 nd Address of Cur	29	red Anni	30	Τ.			10. Name and Ad	orty Tax due Jur			No
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	HRAIBMAN,						.,						
	20 SW 25 C					82	Stre	et Addre	ess (P.O. Box Numbe	r is Not Accept	able)		
DAV	/IE FL 3332	•				83	├		.				
						63							
l I						84	City	-				85 Zip	Code
							L				FL	1 1	
11. Pursuant t	the provisio	ins of Sections 607.0	0502 and 60 late of Florida	7.1508, Florida Stat a. Such channe wa	tutes, the a	bove d by	e-nam	ed corpo	oration submits this s on's board of director	tatement for the	purpose of a	changing intraent as	its registered
agent lar	m familiar with	and accept the of	oligations of,	Section 607.0505,	Florida Sta	tutes	S.	, o , p o , a	0,,000,000,000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	opt in o appo		5 15g.515.00
SIGNATURE													
	Signature, typed or	profed name of registrate				d Age	nt eigne	ture require	d when reinstating)	ALIOSO TO OFF	DATE	DIDECTO	66 111 46
12.		OFFICERS	AND DIREC	DELETE	· 13.	IT) E			ADDITIONS/CHA	ANGES TO OFF		☐ Change	Addition
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	ertify that the	information supplier	d with this file	no does not qualify				ated in S	Section 119 07(3)(i) F	Iorida Statutes	Liudher cer	lify that the	e information

Intereoy ceruly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statufes. I further certify that the information indicated on this annual report or supplemental enriual 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, of on an attachment with an address.

GNATURE:

Wayne

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954-370 -043 2