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

PROFIT CORPORATION ANNUAL REPORT

1998



IT ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000070824 (2)

ALLE	NO ENTERPRISES CO.				
Principal Plac	ce of Business	Mailing Address		-{	(4)
777 SOLITE	H STATE ROAD 7	777 SOUTH STATE ROA	ל ח		•
UNIT A4		UNIT A4		DO NOT WOLL	IN THE COLOR
MARGATE FL 33068		MARGATE FL 33068		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				08/15/1997	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	ŀ	26		65-0775147	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 Additional
22		27	70.740	5. Certificate of Status Desired	Fee Required
City & Stat	lo !	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Country	Trust Fund Contribution	☐ Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid Personal Property Tax due June 3	
24	25 25 2 Name and Address of Current Re		80	10. Name and Address of New Reg	
	AMERILAWYER CHARTERED	*. · *	81 Name T	· / /	1
A A D ALLADONA DI MONTO DE				ess (P.O. Box Number is Not Acceptable	j o
CORAL GABLES FL 33134			62 675	ess (F.O. 80x gumber is Not Acceptable	₽
CONTRACT COLOT			83	RIEL.	
			84 City	pare Uch, Fla	85 Zip Code
			J. 3.0		FL 33068
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. Theselve agent the appointment as 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 account the obligations of Section 607.0505. Elorida Statutes.					
SIGNATURE	Manut F. Chay	DANIEL T.	Arnujo (Y		2
12.	Signature, typind or printed make of registers, agent and OFFICERS AND DI		Registered Agy it signature require	ADDITIONS/CHANGES TO OFFICE	PATE ERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1,1 TITLE	Noomondy in a control	Change Addition
NAME	ARAUJO, DANIEL F		1.2 NAME		
STREET ADDRESS	777 SOUTH STATE ROAD 7		1.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE FL 33068		1.4 CITY-ST-ZIP		
TITLE	\$	☐ DELETE	2.1 TITLE		Change Addition
NAME	ARAUJO, JOHN		2.2 NAME		
STREET ADDRESS	777 SOUTH STATE ROAD 7		2.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE FL 33068		2 4 City-St-ZiP		
TITLE	VP	☐ DELETE	3.1 TITLE		Change Addition
NAME	777 South State	Road 7	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	Margate Fl 330	Ø Ø □ DELETE	3.4. CHY-SI-ZIP		Change Addition
TITLE		L.J DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 51 TITLE		Change Addition
NAME		pand or not p	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 1ITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 suppliemental 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.

FILED

Apr 14 1998 8:00am

Secretary of State