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

**CORPORATION** ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # P97000071093 (3)

## **FILED** Apr 07 1998 8:00am Secretary of State

ALL AR	OUND TOWN EVENTS, IN	). )			
Principal Place		Mailing Address			BOOL HOUL BOILD IN 1940 HILL IDOL
2700 S UNIVERSITY DR STE 1A Davie FL 33328		2700 \$ UNIVERSITY DR \$1 Davie fl 33328	TE 1A	DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	. Total
<b>6</b> Delevier - 10	Const D	T & TALLSCOOT AUGUSTS	<del></del>	<b>08/15/1997 4.</b> FEI Number	1 1
	lace of Business	2a. Mailing Address		65.07748-09	Applied For
Suite, Apt.	# elc	Suite, Apt #, etc.		<u>.</u>	Not Applicable  \$8.75 Additional
22	,, 0.0	27]		5. Certificate of Status Desired	Fee Required
City & State	0	Cily & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zq>	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	d Agent
	ane, donald w		81 Name		
2700 S UNIVERSITY DR STE 1A			82 Street Ad	idress (P.O. Box Number is Not Acceptable)	,
DA	VIE FL 33328				
			83		
			84 City		85 Zip Code
				F	L 1 1
SIGNATURE	egistered agent, or both, in the Statem familiar with, and accept the oblig		Ithorized by the corporate Statutes.	orporation submits this statement for the purposite ration's board of directors. I hereby accept the a	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CRANE, DONALD W		1.2 NAME		
STREET ADDRESS	2700 S UNIVERSITY DR STE	1A	1.3 STREET ADDRESS		
CITY-S1-ZIP	DAVIE FL 33328		1.4 C(TY-ST-2)P		
TITLE	VD	DELETE	2.1 TITLE		Change Addition
NAME	Crane, Elizabeth		2.2 NAME		
STREET ADDRESS	2700 S UNIVERSITY DR STE	1A	2.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33328		2 4 CITY - ST- ZIP		<u></u>
TITLE	STD	DELETE	3 f TITLE		Change Addition
NAME	CRANE, WILLIAM D		3 2 NAME		
STREET ADDRESS	2700 \$ UNIVERSITY DR STE	1A	3 3 STREET ADDRESS		
CITY - ST - ZIP	DAVIE FL 33328		3 4. CITY-ST-ZIP		
TITLE		☐ DELFTE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP		Deter	4.4 C(TY-ST-Z)P		Change Addition
TITLE		L_J DELFTE	5.1 TITLE		CT CHANGE CT MOUNTON
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DECETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		LJ DECETE	61 TITLE		☐ cuange ☐ ¥00(((0))
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	adily that the internation constant	with this films done not qualify for	6.4 City-St-ZiP	in Section 119 07/3V() Florida Statutes I further	cortifu that the information

remove come or an an information supplied with this bling does not quality 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.