FIL	E NOW:	FILING FEE A	FTFR M	ΔΥ 1ST IS	\$ \$550	 1						
PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE				FILED				
			9	Secretary	dra B. Mortham cretary of State OF CORPORATIONS			Jan 29 1998 8:00am Secretary of State				
1. Corporati	IMENT :	. 0,000	00711	51 (9)								
11210 SW 1ST STREET 11				failing Address 11210 SW 1ST STREET PLANTATION FL 33325				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/15/1997				
2. Principal I	Place of Busine	5\$	2a. Mailing					4. FEI Number		I I A	oplied For	
21				.Box 55	1686			65-0775455			ot Applicable	
Suite, Apt			27	Apt. #, etc.				5. Certificate of Status Desired		+	Additional equired	
City & Sta 23 Zip	ie	Country		LAUDERDA				Election Campaign Financing Trust Fund Contribution		Added	May Be to Fees	
24	2:	¬ ' ' ' ' '	Zip 29 333	55-16863	Country	/		This corporation owes or has pa Personal Property Tax due June			tangible ☑ No	
		nd Address of Current						10. Name and Address of New Re			7 1/10	
	JLE, JAMES F				81	Name	!					
	210 SW 1ST				82	Street	Addres	ss (P.O. Box Number is Not Acceptate	ole)		·	
PL.	antation fl	_ 33325			83				<u> </u>			
					84	City			FL	85 Zip	Code	
	to the provision registered ager am familiar with	ns of Sections 607.0502 nt, or both, in the State of , and accept the obligat	and 607.1508 of Florida. Such ions of, Section	, Florida Statutes n change was aut n 607.0505, Florid	, the above thorized by da Statute	e-named the corps.	i corpoi poratio	ration submits this statement for the p n's board of directors. I hereby accep	ourpose of o	hanging it ntment as	s registered registered	
SIGNATURE	Signature, typed or	printed name of registered agent	and title if applicab	le. (NOTE É	Registered Age	ant signature	e remitod	when reinstating)	DATE			
12.		OFFICERS AND			13.		01042104	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12	
TITLE				DELETE	1.1 TITLE		P/5		. [Change	Addition	
NAME					1.2 NAME		Jan	nes R. Eule		-		
STREET ADDRESS CITY-ST-ZIP					1.3 STREET			10 SW IST ST HITHTON , FL 33325	- .			
TITLE				DELETE	1.4 CITY - S 2.1 TITLE	1-212	I LA	ATTAILE W PL 53323		Change	Addition	
NAME					2.2 NAME			K. u tipa		_ +uge		
STREET ADDRESS					2.3 STREET	ADDRESS			•			
CITY-ST-ZIP		(ASI 4) 40			2. 4 CITY - 9	T-ZIP						
TITLE				☐ DELETE	3.1 TITLE				L	Change	Addition	
NAME STREET ADDRESS					3.2 NAME							
CITY-ST-ZIP					3.3 STREET	- 1						
TITLE				DELETE	3.4. CITY - S 4.1 TITLE	it-ZIP				Change	Addition	
NAME				_	4. 2 NAME				_			
STREET ADDRESS					4.3 STREET	address		1				
CITY-ST-ZIP	1.1.				4.4 CITY - S	r-ZIP	L					
TITLE				L DELETE	5.1 TITLE			·		Change	Addition	
STREET ADDRESS					5.2 NAME	ADDDERS						
CITY-ST-ZIP					5.3 STREET 5.4 CITY-S							
TITLE				DELETE	6.1 TITLE	Li				Спалде	Addition	

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:

| 1 | 12 | 98 | 954 | 473 | 2486 |

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS