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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000075782 (7)

DEREK J. COADY, INC.

Principal Place of Business

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CHY-ST-ZIP

STREET ADDRESS

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE NAME

400 NE 58TH APT. B FORT LAUDER	STREET RDALE FL 33334	Ä	400 NE 58TH STREET APT. B FORT LAUDERDALE FL 33334				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/29/1997			
2. Principal Pi	ace of Business	3	2a.	2a. Mailing Address				4. FEt Number	Applied F	d For
Suite, Apt. #, etc. City & State 23			26	26				65-6776753 Not Applica		
			27	Suite, Apt. #, ctc. 27 City & State 28				5. Certificate of Status Desired S8.75 Addition		
			28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip		Country		Zφ	<u> </u>	Country		8. This corporation owes or has paid the cur	_/' _ `	е
24	2529			30			1	ZYes ☐ No		
9. Name and Address of Current Registered Agent						81	Name	10. Name and Address of New Registered	Agent	
AP1	NE 58TH STI I. B RT LAUDERDA				City	idress (P.O. Box Number is Not Acceptable)	85 Zip Code			
office or re	opistered agent	or both in the S	State of Florid	07.1508, Florida State da. Such change was f, Section 607.0505, F	: authorize	d by	the corpor	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the app	changing its regist cintment as registe	stered ered
SIGNATURE	Signature, typed or p	ont ed n ame of registers	d ageol and ble	if applicable (NC	JTE: Registere	д Арг	nt signature ren	prired when reinstating) DATE		
12.		OFFICERS	AND DIREC	- 	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	DELETE		1.11	ITLE			☐ Change ☐ Ar	Addition	
NAME	00.00.0				AME					
STREET ADDRESS					, 1.3 S	IHEEI	ADDRESS			
CITY-ST-ZIP	FORT LAU	DERDALE FL 30	3334		1.4 0	ITY-S	1 - 7IP			
TITLE				DELETE	2.1 T	ITLE			☐ Change ☐ Ac	Addition
NAME					22 N	AMÉ				

2.3 STREET ADDRESS

2 4 CITY - S1 - 7/P

3 4. CITY - \$1 - ZIP

4.3 STREET ADDRESS 4 4 CITY - \$1 - ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

54 CITY - S1 - ZIP

3.1 TITLE

3.2 NAME 3.3 STREET ADDRESS

4.1 TITLE

4 2 NAME

51 THUE 5.2 NAME

6.1 TITLE

62 NAME

DELF 1E

DELETE

DELETE

DETETÉ

CITY-ST-ZIP 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 supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 aridress.

FILED

Jan 16 1998 8:00am

Secretary of State

Change

☐ Change

Change

Addition

Addition

Addition

___ Addition