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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 31 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000075973 (2)

ACT II OF BOYNTON BEACH, INC.									
						I IRANIAAN INA ARAN MAKA BAKA MA	AL ad iah baha M	Pari bidia Hani ia	
Principal Plac	ce of Business	Mailing Address							
· '		•	· ·						************
805 NORTH FEDERAL HIGHWAY 805 NORTH FI BOYNTON BEACH FL 33435 BOYNTON BEACH			DERAL HIGHWAY						
BOTH OF BEACH TE ST			,,,,			DO NOT W	RITE IN THE	S SPACE	
ļ						3. Date Incorporated or Qualifi	ed	4	
<u> </u>						09/02/1997			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0779252		A	pplied For		
Sulte. Apt. #, etc.		Suite Apl # etc			03-0779232			lot Applicable	
22 Suite, Apr. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
City & State		City & State					lequired		
23		28		6. Election Campaign Financin Trust Fund Contribution	° □		May Be		
Zip Country		Zip Country			This corporation owes or ha			to Fees	
24	25	29	30			Personal Property Tax due J			∏ No
9, Name and Address of Current Registered Agent						10. Name and Address of New			
SONNENFELD, BERNARD R				Nam	e				
649 U.S. HIGHWAY ONE STE. 16			82	Stro	at Addro	ess (P.O. Box Number is Not Acce	ntoble)		
	RTH PALM BEACH FL 33408		"	Silbe	ot Adding	ss (F.O. BOX NUMBERS NOT ACCE	Jiaole)		
			83					~~ 	
	,		84	City	·			14-1 7:-	O. d.
				"			FI	L '	Code
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statut	tes, the abov	e-name	d corpo	oration submits this statement for the	ne purpose	of changing i	ts registered
agent. La	egistered agent, or both, in the State of im familiar with, and accept the obligat	ir Florida. Such change was ions of, Section 607.0505, Fl	authorizeo b orida Statule	y the co s.	orporatio	on's board of directors. I hereby ac	cept the ap	pointment as	registered
SIGNATURE	-								
	Signature, typed or printed name of registered agent			ent eignati	ure require	d when reinstating)	DATE		
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.		<u>,</u>	ADDITIONS/CHANGES TO O	FICERS AN		
TITLE				1.1 TITLE				L Change	Addition
NAME	Shirley Acker			1.2 NAME					
STREET ADDRESS	71 Cambridge Lane			1.3 STREET ADDRESS					
CITY-ST-ZIP	Boynton Beach,FL 33436			1.4 CITY-ST-ZIP					
TITLE	-			2.1 TITLE				∟ Change	Addition
NAME	Donna Quintavalle			2.2 NAME					
STREET ADDRESS	2204 Aspen Way			2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	Boynton Beach, FL 33436			2.4 CITY-ST-ZIP					1 1 4 4 104
		L DECEIE	3.1 TITLE			•		Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET		3				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 3	T-ZIP	+				4.480
		☐ DELCIE	4.1 TITLE					Change	Addition
NAME OTOGET ADODESO			4. 2 NAME						
STREET ADDRESS			4.3 STREET		i				
CITY-ST-ZIP TITLE	DELETE			4.4 CITY-ST-ZIP					1 1 4 4 9 9
	Dettit			5.1 TITLE				☐ Change	Addition
NAME STREET ADDRESS			5.2 NAME						
STREET ADDRESS			5.3 STREET						
CITY-ST-ZIP TITLE	<u> </u>	DELETÉ	5.4 CITY-S	T-ZIP	 			Chara	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
		C) DELETE	6.1 TITLE					L. Change	Addition
NAME CTOSET ADDDESS			6.2 NAME		i				
STREET ADDRESS			6.3 STREET	ADDRESS					

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. x 2-25,98

SHIRLEY ACKER