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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000081130 (1)

VENTURE PLACE, INC.

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									1 tagriddi sia 18fft 148ff Affit 68fff 88fff 48fff		rasa VI	is Adii 1891	
12769 W FOI	769 W FOREST HILL I	HILL BLVD											
SUITE E WELLINGTON FL 33414				SUITE E WELLINGTON FL 33414				Ţ	DO NOT WRITE IN THIS SPACE				
110001101011111111111111111111111111111								3	Date Incorporated or Qualified				
									09/18/1997				
2. Principal Place of Business				2a. Mailing Address				1	I. FEI Number	Number Applied For			
21				26					Applied For	Not Applicable			
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5	5. Certificate of Status Desired See Required Fee Required				
22 City & State				City & State				———— <u>-</u> -				·	
23				28				6	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country			Zip Country					R	8. This corporation owes or has paid the current year Intangible				
24	25			29 30					Personal Property Tax due June 30. Yes No				
		Address of Current	Registe	red Agent				10). Name and Address of New Registers	d Agent			
	RRO, HILDA M					B1	Name						
	769 W FOREST				82 Street Address (P.O. Box Number is Not Acceptable)								
SUITE E													
WELLINGTON FL 33414													
						84	City		F	85	Zip (Code	
11. Pursuant	to the provisions of	Sections 607.0502	and 60	7.1508, Florida Statut	es, the a	pove	-named	Corporation	ion submits this statement for the purpose	of chanc	ging it	s registered	
office or r agent. I a	re gistere d agent, d im fam iliar with, an	ir both, in the State o d accept the obligat	f Florida ions of,	n. Such change was Section 607.0505, Fi	authorize orida Sta	d by tutes	the corp	poration's	board of directors. I hereby accept the a	ppointme	ent as	registered	
SIGNATURE	agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
	Signature, typed or pont	ed name of registered agent				d Age	nt signature	edw beniupen e	en reinstating) DATE				
12,	<u> </u>	OFFICERS AND	DIREC'		13.	7. 5			ADDITIONS/CHANGES TO OFFICERS A				
TITLE	NUBICK 104	SEDN		☐ DELETE	1.1 11						ange	☐ Addition	
NAME NORICK, JOSEPH STREET ADDRESS 12769 W FOREST HILL BLVD							1.2 NAME 1.3 STHEET ADDRESS					Ì	
STREET ADDRESS	WELLINGTO		JUILE	<u> </u>	1			}				ļ	
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NAME				Pul Petric	2.1 II					<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	na ny u	/ Multion	
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CITY-ST-ZIP						ITY-S]				Į	
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CITY-ST-ZIP					3.4. C	ITY-S	1- ZIP]					
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NAME					5.2 N	AME							
STREET ADDRESS					5 .3 S	rreet a	ADDRESS						
CITY-ST-ZIP		 		200.000		TY-ST	- ZIP	ļ				77 4 . 0.4	
TITLE				☐ DELETE	6111		i	1		Ch	ange	Addition	
NAME					6.2 N							İ	
STREET ADDRESS							ADDRESS					ĺ	
CITY-ST-ZIP	certify that the info	rmation supplied with	thic fili	na does not qualify f		IY-\$I		ed in Secti	ion 119 07(3)(i). Florida Statutes, I further	cortify th	at the	information	

indicated on this annual report or supplied with this initing does not quality for the exemption stated in section 119.07(3)(), Florida Statutes, further certify that the information indicated on this annual report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it 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.

Llaker