## 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 # P97000081609 (4)

FURIU	NE FINANCIAL GHOUP, I	<b>1</b> 0.		1 10 1 10 10 10 10 10 10 10 10 10 10 10	
Principal Place	ol Business	Mailing Address		C HADDINGOLDING LOTTE LOGIN GAIN AND IN AND LICE BESSEL I	BIRT HAND BAND BRING SAUF (BAL
2234 NORTH FEDERAL HIGHWAY #315 2234 NORTH FEDERAL H			RGHWAY #315		
BOCA RATON FL 33431 BOCA RATON FL 3343		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified	
				09/16/1997	
2. Principal Place of Business 2s. Mailing Address		}a "		4. FEI Number 65-078 2783	Applied For
		26 Surie, Apt. #, etc.		+- <del></del>	Not Applicable \$8.75 Additional
22 27			5. Certificate of Status Desired	Fee Required	
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Žφ	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes No
<u> </u>	g, Name and Address of Curr	<del></del>	81 Name	10. Name and Address of New Registere	u Agent
	RPORATION SERVICE COMPA	NŤ			
1201 HAYS STREET TALLAHASSEE FL 32301-2525			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	·· · · · · · · · · · · · · · · · · · ·
			83		
}					
ļ			84 City	F	85 Zip Code
office or re agont I an	o the provisions of Sections 607 05 spistered agent, or both, in the Sta n familiar with, and accept the obli	te of Florida. Such change was a	authorized by the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	gent and liftle if applicable [NOTE	Registered Agent signature requir	red when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	DIAMOND, BRET		1.2 NAME		ļ
STREET ADDRESS #315, 2234 N. FEDERAL HWY.			1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 T(TL€		☐ Change ☐ Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		}
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Observe T Addition
TITLE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME		La becere	4.2 NAME		L. Johnnyo L. Hadikishi
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TIFLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		,
CITY-ST-ZIP			54 CITY-ST-ZIP		
TOTLE	<del></del>	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
					1

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.

561-392-8305

**FILED** 

Apr 21 1998 8:00am

Secretary of State