## 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 # P97000083194 (5)

FILED
May 13 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address	hit Barrı Adribi (6:00 ilibil ftask låsti 8101 in 81
7252 N.W. 63RD TERRACE 7252 N.W. 63RD TERRACE PARKLAND FL 33067 PARKLAND FL 33067  DO NOT WRI	TE IN THIS SPACE
3. Date Incorporated or Qualified	3
09/19/1997	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 65-0781958	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5, Certificate of Status Desired	\$8.75 Additional
22 City & State City & State 6. Certificate of States Desired  City & State 6. Certificate of States Desired  6. Election Campaign Financing	Fee Required
	\$5.00 May Be Added to Fees
Zip Country Zip Country 8, This corporation owes or has	
24 25 29 30 Personal Property Tax due Jul	
g. Name and Address of Current Registered Agent 10. Name and Address of New I	
MOORE, ROBERT M 81 Name	
7252 N.W. 63RD TERRACE 82 Street Address (P.O. Box Number is Not Accept	(able)
PARKLAND FL 33067	abic)
63	
84 City	<b>85</b> Zip Code
	FL   S   Z   D COOR
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the	purpose of changing its registered
office or registered agent, or both, in the State of Floridal Such change was authorized by the corporation's board of directors. I hereby accagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ept trie appointment as registered
SIGNATURE	
Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12 Change Addition
NAME MOORE, ROBERT M 12 NAME	Change C Addition
STREET ADDRESS 7252 N.W. 63RD TERRACE 1.3 STREET ADDRESS	
CITY-ST-ZIP PARKLAND FL 33067	
TITLE DELETE 2.1 TITLE	Change Addition
NAME 2.2 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	]
CITY-ST-ZIP 2.4 CITY-ST-ZIP	
TITLE DELETE 31TITLE	Change Addition
NAME 3.2 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
TITLE DELETE 5.1 TITLE	Change Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	i
CITY-ST-ZIP 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE DELETE 6.1 TITLE	C crange C vocasi
NAME 6.2 NAME	Li cualità Li Addinoi
<b>l</b>	Unango Li Addition

14. Thereby 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 13 if Chapter 607, Florida Statutes.

IGNATURE ROBULT M MODE 1 /28/99 (954) 341- 1224