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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000091694 (4) DOCUMENT #
1. Corporation Name

DEVITO & ASSOCIATES, INC.

Principal Place of Business	Mailing Address		
13684 EXOTICA LANE	13684 EXOTICA LANE		
WELLINGTON FL 33414	WELLINGTON FL 33414		

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							-{		
13684 EXOTICA LANE WELLINGTON FL 33414 13684 EXOTICA LANE WELLINGTON FL 33414							DO NOT WRITE IN THIS SPACE		
F								3. Date Incorporated or Qualified 10/24/1997	
2. Principal Place of Business 2a. Mailing Address								4, FEI Number Applied For	
21 26							65-0791862 Not Applicable		
Suite, Apt. #, etc. Suite, Apt				Suite, Apt. #, etc.	pt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
City & State			27	City & State				Fee Required	
23			— <u>1</u>	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip				Cou	ntry	<u>, , , , , , , , , , , , , , , , , , , </u>	8. This corporation owes or has paid the current year Intangible		
24	25 29 30			30			Personal Property Tax due June 30. Yes X No		
9, Name and Address of Current Registered Agent Elitable INC B1 N								10. Name and Address of New Registered Agent	
	JNGS, INC. 22 N.W. 14					81 Name			
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132						82 Street Address (P.O. Box Number is Not Acceptable)			
. , ,						83			
						84	City	85 Zip Code	
<u></u>									
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 Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
L	Signature, typed		stered agent and title if		-	Age	ent signature require		
12.	Б	OFFICE	RS AND DIRECT	DELETE	13.	1 E	····	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	_	, MATHA			1.2 NA				
STREET ADDRESS	40004 EVOTICA LANE				ADDRESS				
CITY-ST-ZIP	MELLINGTON EL 22414		1.4 Ci1						
TITLE	I =			DELETE 2.1 TIT				☐ Change ☐ Addition	
NAME DEVITO , ROBERT JR				2.2 NA					
STREET ADDRESS		XOTICA LANE	_		2.3 ST	REET.	ADDRESS		
CITY-ST-ZIP	WELLIN	GTON FL 3341	4		2. 4 CI		ST-ZIP		
TITLE				DELETE	3.1 TIT			Change Addition	
NAME					3.2 NA				
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP TITLE				DELETE	3.4. CI		ST-2IP	Change Addition	
NAME				Lad DELLIE	4.1 TI7 4. 2 NA			☐ Change ☐ Addition	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP							l		
TITLE				DELETE	4.4 CITY - ST		1-511	Change Addition	
NAME					5.2 NA			the country of the country	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					5.4 CIT				
TITLE				DELETE	6.1 TIT		·	☐ Change ☐ Addition	
NAME					6.2 NAI		İ		
STREET ADDRESS					ľ		ADDRESS		
CITY-ST-ZIP					6.4 CIT				
dd Ibaaaba			11 1 11 11 11 11						

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.

1511 600 1111