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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000099257 (2)

FORT LAUDERDALE THINKERS INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4240 NORTHWEST 21ST STREET 4240 NORTHWEST 21ST STREET **UNIT 147 UNIT 147** LAUDERHILL FL 33313 LAUDERHILL FL 33313 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/20/1997 2a. Mailing Address El Number Applied For Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes 30 Name and Address of Current Registered Agent MOLLOY, ARTHUR J 4240 NORTHWEST 21ST STREET 82 **UNIT 147** LAUDERHILL FL 33313 11. Pursuant to the proffice or registers agent. I am famili mits this statement for the purpose of changing its registere of directors. I hereby accept the appointment as registered OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change ☐ Addition TITLE 11 TITLE BERRY, FERNANDO 12 NAME NAME 4240 NORTHWEST 21ST STREET STREET ADDRESS 1.3 STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE YODER, RANDY NAME 22 NAME 4240 NORTHWEST 21ST STREET STREET ADDRESS 2.3 STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE MOLLOY, ARTHUR J NAME 3.2 NAME 4240 NORTHWEST 21ST STREET STREET ADDRESS 3.3 STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP 3 4 City-St-ZiP DELETE Change Addition 4.1 TITLE DERONDA, WILLIAM J NAME 4. 2 NAME **4240 NORTHWEST 21ST STREET** STREET ADDRESS 4.3 STREET ADDRESS **LAUDERHILL FL 33313** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

ormation 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 port 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 proportion or the receiver or true legal provisor to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the in indicated on this annual r