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

	MENT # P9700(PORTS COMPANY	0103235 (2)			
Principal Plac	e of Business	Mailing Address		I CABULDOL FUR CRAUS SABAN DONIN BOUND DON	El hinu delen illin ilden kilen Afil 1841
1307 S.W. 18	ETH COURT	1307 S.W. 18TH COURT			
FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 333			315	1	
				DO NOT WRITE	IN THIS SPACE
(3. Date Incorporated or Qualified	ļ
	40	La Alemana Addition		12/08/1997	
F-5 '' F-		2a. Mailing Address		4. FEI Number	Applied For
21 26 Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3487574	Not Applicable \$8.75 Additional
Ŀ −¬ ' ' ¬		F-1		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
13		28		Trust Fund Contribution	Added to Fees
1 7m	Country	Zip	Country	8. This corporation owes or has pair	
24	25	├ ─ `	, 	Personal Property Tax due June	
	9. Name and Address of Current			10. Name and Address of New Reg	
37 SU	DGARTY, WILLAIM M O W. CAMINO GARDEN BLVD. JITE 206B DCA RATON FL 33432		82 Street Add /307	ATHLEN BEASLEY ress (P.O. Box Number is Not Acceptable SW 18C7	
	/O	1 007 4500 Fig. 14 Co. 1	84 City 7	Land	FL 85 Zip Code 3.33/5
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					
<u></u>	Signature, typed or printed name disagistered agen		Registered Agent signature requi		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D COLOUR WATER	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BEASLEY, KATHLEEN		1.2 NAME		
STREET ADDRESS	1307 S.W. 18TH COURT	_	1.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33315		1.4 CITY - ST - ZIP		
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	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		i
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		ļ
STREET ADDRESS			4 3 STREET ADDRESS		İ
CITY-ST-ZIP			4.4 CITY - ST - ZIP		ŀ
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS	_		5.9 STREET ADDRESS		ł
CITY-ST-ZIP	; *		5.4 CITY-ST-ZIP		ļ
TITLE		DELETE	6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME			6.2 NAME		_ , _
CTREET ADMRCCC			6.2 CTDEET ADADECC		ļ

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 12 or Block 13 if changed, or on an attachment with an address.

(554) 7643879

FILED

Apr 17 1998 8:00am

Secretary of State