## 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

## P97000108423 (9) DOCUMENT #

## **FILED** Apr 24 1998 8:00am Secretary of State

CLEAR VIEW INTERNATIONAL, INC. Principal Place of Business Mailing Address 4420-A NE 20TH AVENUE 4420-A NE 20TH AVENUE FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/26/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 City & State \$5.00 May Be 6, Election Campaign Financing Г 28 Trust Fund Contribution Added to Fees Country Country  $Z_{1D}$ 8. This corporation owes or has paid the current year Intangible Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MULLANEY, BILL 4420-A NE 20TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33308 83 84 Zip Code City 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 Signature, typed or printed name of registered agree and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE MULLANEY, BILL NAMÉ 1.2 NAME 4420-A NE 20TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33308 CITY-ST-2IP 1.4 CITY - ST - ZIP TITLE DELETE Change ☐ Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 THTLE Change Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 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 54 CITY-ST-ZIP DELETE Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

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.

4-22-98