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

PROFIT
CORPORATION
ANNUAL REPORT
1998

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S04823

(8)

GEORGIANNA OR JOSEPH LAW, INC.

Secre	etary	OT.	State

**FILED** 

Mar 25 1998 8:00am

8/3-397-1408

Principal Place of Business		Mailing Address	Mailing Address		I (MONINOS) IN ORAN OLDON YOUR HARD WIN OLDON BROKE BIRN OLDON CONTRACTOR			
13000 GULF BLVD.		13000 GULF BLVD.	13000 GULF BLVD.					
APT. 313		APT. 313	APT. 313		DO NOT WRITE IN THIS SPACE			
MADERIA BEACH FL 33708		MADERIA BEACH FL 3	MADERIA BEACH FL 33708		3. Date Incorporated or Qualified			
					09/26/1990			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number Applied For			
21		26			59-3024733 Not Applicable			
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.			S8.75 Additional			
22		27			5. Certificate of Status Desired Fee Required			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28	1 0-		Trust Fund Contribution			
<b>Z</b> ip	Country	Zip	⊢¬	ıntry	8. This corporation owes or has paid the current year Intang ble Personal Property Tax due June 30. Yes No			
24	25 g. Name and Address of Curr	29] ent Registered Agent	30]	T	10. Name and Address of New Registered Agent			
1 414		one registered register		81 Name				
	/, Georgianna Smith 00 Gulf Blvd.			82 Street	Address (P.O. Box Number is Not Acceptable)			
	. 313			Street	( Address (P.O. Box Number is Not Acceptable)			
	DERIA BEACH FL 33708			83				
	7E, (B) (B) (C) (C) (C)			84 City	85 Zip Code			
					FL			
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Fiorida 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 reg stered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE			1075 6		re required when reinstaling) DATE			
	Signature, typod or printed name of registered a	ND DIRECTORS	13.	a Agent signatur	re required when reinstaling) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	P	DELETE	1,1 T	ITLE	Change Addition			
NAME	LAW, GEORGIANNA	_		IAME				
STREET ADDRESS	13000 GULF BLVD.		1.3 9	TREET ADDRESS				
ÇITY-ST-ZIP	MADERIA BEACH FL		1.4 0	HTY-\$1-2(P				
TITLE	V	☐ DELETE	2.1 T	ITLE	Change Addition			
NAME	LAW, JOSEPH		2.2 N	IAME				
STREET ADDRESS	13000 GULF BLVD.		2.3 8	TREET ADDRESS				
CITY-\$T-ZIP	MADERIA BEACH FL 33708			CITY-ST-ZIP	Change Addition			
TITLE		DELETE	3.1 7		Claude Clydosou			
NAME			3.2					
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP		DELETE	3 4.1 T	CITY-ST-ZIP	Change Addition			
TITLE		Carlo December		NAME				
NAME STREET ADDRESS			1 -	STREET ADDRESS	,			
CITY-ST-ZIP				CITY-ST-ZIP				
TITLE		DELETE	5.11		Change Addition			
NAME			5.21	IAME				
STREET ADDRESS			5.3 9	STREET ADDRESS				
CITY-ST-ZIP			5.4 (	CITY-ST-ZIP				
TITLE	<del></del>	DELETE		TITLE	Change . Addition			
NAME			6.21	NAME				
STREET ADDRESS			6.3 \$	street address				
CITY-ST-ZIP			6.4 (	CITY-ST-ZIP				
indicated officer or of	an this appual report of currylama	ntal annual report is true and a oceiver or trustee empowered	accurate ar	an that my si	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in			

President