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

FILED Jan 15 1998 8:00am Secretary of State

DOCUMENT # S21189 (3)					<i>-</i>	
	on Name Y ENTERPRISES OF FLO	• •				
VENII	ENTENENINES OF FLO	ONIDA, INC.				
Principal Plac	e of Business	Mailing Address				
1750 AUSTR	ALIAN AVE	1750 AUSTRALIAN AVE				
RIVIERA BEA	ACH FL 33404	RIVIERA BEACH FL 3340	4			
-					DO NOT WRITE IN THIS SPACE	_
					3. Date incorporated or Qualified 12/24/1990	
2. Principa! F	Place of Business	2a. Mailing Address			4. FEI Number Applied For	\dashv
21		26			65-0238746 Not Applicable	9
Suite, Apt	#, etc.	Suite, Apt. #, etc.	⊢		5. Certificate of Status Desired S8.75 Additional	٦
22		27	The state of the s		Fee Required	4
City & Stat	18	City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip			8. This corporation owes or has paid the current year Intangible	\dashv
24			30		Personal Property Tax due June 30. Yes No	
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	1
VERITY, AUSTIN W.				Name		
	50 AUSTRALIAN AVE		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	1
RIVIERA BEACH FL 33404			83	ļ		4
			03			
			84	City	FL 85 Zip Code	٦
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508. Florida Statute	s, the abov	e-named co		Н
office or I	registered agent, or both, in the S	State of Florida, Such change was a	uthorized b	y the corpor	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Quitin W	Var. Ti	ilou oluloio	.	1-1-98	
SIGNATORE	Signature, typed or printed name of registere		: Registered Ag	ent signature rec	equired when reinstating) DATE	∐i
12,	OFFICERS	AND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_[3
TITLE	VERITY, AUSTIN W	☐ DELETE	1.1 TITLE		Change Addition	13
NAME STREET ADORESS	1750 AUSTRALIAN AVE		1.2 NAME	ADDRESS		18
CITY-ST-ZIP	RIVIERA BEACH FL		1.4 CITY - 1			1
TITLE	DP	☐ DELETE	2.1 TITLE	7)-2(1	Change Addition	H
NAME	VERITY, DOROTHY H		2.2 NAME			
STREET ADDRESS	1750 AUSTRALIAN AVE		2.3 STREE	ADDRESS	3,0	-
City-ST-ZIP	RIVIERA BEACH FL		2. 4 CITY -	ST-ZIP		
TITLE	DV	☐ DELETE	3.1 TITLE		Change Addition	1
NAME	VERITY, AUSTIN W III 1750 AUSTRALIAN AVE		3.2 NAME			
STREET ADDRESS	RIVIERA BEACH FL			ADDRESS		
CITY-ST-ZIP TITLE	DT DT	☐ DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	Change Addition	+
NAME	REMES, SUSAN		4.1 IIILE 4. 2 NAME		E Onlinge E Audukuli	
STREET ADDRESS	1750 AUSTRALIAN AVE			ADDRESS		
CITY-ST-ZIP	RIVIERA BEACH FL		4.4 CiTY-5	i		
TITLE		DELETE	5.1 TITLE	· 5"	Change Addition	,
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY - ST - ZIP			5.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS				ADDRESS		
CITY - ST - ZIP	<u> </u>		6.4 CITY - S	T-ZIP		-1

14. I hereby certify that the Information supplied with this filling 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 cath; 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.

SIGNATURE:

1-6-98