## 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

DOCUMENT # \$66285

(5)

RAY WHITEHEAD & ASSOCIATES, INC.

FILED
Jan 29 1998 8:00am
Secretary of State

								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				<b>e</b>		
Principal Place of Business Mailir				ng Address	····		<del></del>	1	ia ila dilla billa			UH USUA UI		41811 1881
10845 NW 50 ST			1084	10845 NW 50 ST										
SUNRISE FL 333\$1				SUNRISE FL 33351				DO NOT WRITE IN THIS SPACE						
US			US					O Data la				S SPACE		
								07/15	corporated or	Qualified				
2. Principal Pla	ace of Business		2a N	Mailing Address				4. FEI Nun					TAn	plied For
2. Frincipal Flace of Business			26				T. P. Silver					t Applicable		
Suite, Apt. f	#. etc.		+	uite, Apt. #, etc	3.		•	1				\$8.	o	Additional
22			27				5. Certificate of Status Desired Fee Required							
City & State	)		C	ily & State				6. Election	Campaign F	inancing		\$5	.00	May Be
23	·		28		<del></del>			Trust Fu	nd Contributi	on		A	ided t	o Fees
Zip	<u>├</u>	untry	<b>├</b> -7	ip	Cou	ntry		1	poration owe:				_	
24	25		29		30				Property Ta			▼ Yes		No No
100	9. Name and A	dress of Curre	ent Register	rea Agent		<b>81</b> N	ame	10, Name a	nd Address	OT NOW H	egistere	a Agent		
	ITEHEAD, RAY	PP 1 AL MILITARY				14	anic							
409 NORTHWEST 97TH AVENUE						<b>82</b> St	reet Addre	ess (P.O. Box Number is Not Acceptable)						
PLA	NTATION FL 333	24				B3								
						63								
					ľ	<b>84</b> Ci	ty	<del></del>				85	Zip (	Code
	o the provisions of	007.00	05 1007	4500 E		_ــــ	<del></del>		-113		F		<del>, , ,</del>	<del></del>
office or re agent. I an	egistered agent, or in familiar with, and	accept the obli	gations of, S	Section 607.050	was authorized 05, Florida Stati	ites.	r corporaux	bits boatd of	andetere. Trie	,				
office or re agent. I an SIGNATURE	Signature, typed or printed		gent and tille dia	nplicable DRS	(NOTE Registered			ed when reinstating)	NS/CHANGES		DATE	ND DIREC	CTOR	S IN 12
office or reagent. I an SIGNATURE 5	Signature, typed or printed	name of registered a OFFICERS Af	gent and tille dia	pplicabe	(NOTE Registered	Agent siç		ed when reinstating)			DATE		CTOR	S IN 12
office or reagent. I an SIGNATURE 5	Signature, typed or printed DP WHITEHEAD, F	namin of registered a OFFICERS Af	gent and tille dia	nplicable DRS	(NOTE Registered  13. E 1.1 I/T 1 2 NA	Agent sig	nature required	ed when reinstating)			DATE	ND DIREC	CTOR	S IN 12
office or reagent. I an SIGNATURE	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS Af	gent and tille dia	nplicable DRS	(NOTE: Registered  13. E 1.1 Tif 12 NA 1.3 STi	Agent sig LE MF REET ADDA	nature required	ed when reinstating)			DATE	ND DIREC	CTOR	
office or reagent. I an SIGNATURE  **T2.**  TITLE NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed DP WHITEHEAD, F	namin of registered a OFFICERS Af	gent and tille dia	ppicable ORS DELETE	(NOTE: Registered 13. E 1.1 Til 12 NA 1.3 STI 1.4 CII	Agent sig LE MF REET ADDR Y-ST-ZIP	nature required	ed when reinstating)			DATE	ND DIRE	CTOR ange	S IN 12
office or reagent. I an SIGNATURE TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS Af	gent and tille dia	nplicable DRS	(NOTE: Registered 13. E 1.1 III 12 NA 1.3 STI 1.4 CIT E 2.1 III	Agent sig LE MF REET ADDR Y-ST-ZIP LE	nature required	ed when reinstating)			DATE	ND DIREC	CTOR ange	S IN 12
office or reagent. I an SIGNATURE 2. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	ppicable ORS DELETE	(NOTE: Registered  13. E 1.1 Tif 12 NA 1.3 STI 1.4 CIT E 2.1 TIT 2.2 NA	Agent sig LE MF REET ADDR Y-ST-ZIP LE	anature requires	ed when reinstating)			DATE	ND DIRE	CTOR ange	S IN 12
office or reagent. I an SIGNATURE 2.  172.  11TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	ppicable ORS DELETE	(NOTE: Registered  13. E 1.1 III 12 NA 13 STI 1.4 CIT E 2.1 TIT 2.2 NA 2.3 STI	Agent signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR	RESS	ed when reinstating)			DATE	ND DIRE	CTOR ange	S IN 12
office or reagent. I an SIGNATURE 2. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	ppicable ORS DELETE	(NOTE: Registered 13. E 1.1 III 12 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 2.4 CI	Agent sic LE MF REET ADDI Y-ST-ZIP LE ME REET ADDI IY-ST-ZI	RESS	ed when reinstating)			DATE	ND DIRE	CTOR ange ange	S IN 12 Addition Addition
office or reagent. I an SIGNATURE  **12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICADOR  DELETE	(NOTE: Registered 13. E 1.1 III 12 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 2.4 CI	Agent signed LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR IY-ST-ZII	RESS	ed when reinstating)			DATE	NO DIRE.	CTOR ange ange	S IN 12
office or reagent. I an SIGNATURE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICADOR  DELETE	(NOTE Registered  13. E 1.1 IIT 12 NA 13 SII 1.4 CII 2.2 NA 2.3 STE 2.4 CI E 3.1 TIT 32 NA	Agent signed LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR IY-ST-ZII	RESS	ed when reinstating)			DATE	NO DIRE.	CTOR ange ange	S IN 12 Addition Addition
Office of reagent. I am SIGNATURE  **12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICADOR  DELETE	(NOTE Registered  13.  E 1.1 IIT 12 NA 13 SII 1.4 CII 2.2 NA 2.3 SII 2.4 CI E 3.1 TIT 32 NA 33 SII	Agent signification of the control o	RESS	ed when reinstating)			DATE	NO DIRE.	CTOR ange ange	S IN 12 Addition Addition
Office of the agent. I am agen	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICADOR  DELETE	(NOTE Registered  13. E 1.1 IIT 12 NA 13 STI 2.1 NI 2.2 NA 2.3 STI 2.4 CI E 3.1 TIT 3.2 NA 3.3 STI 3.4 CI 3.4 CI	Agent signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR IY-ST-ZII LE ME REET ADDR IF ME	RESS	ed when reinstating)			DATE	NO DIRE.	CTOR ange ange	S IN 12 Addition Addition
Office of te agent. I an SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICable  ORS  DELETE  DELETE	(NOTE Registered  13. E 1.1 IIT 12 NA 13 SII 1.4 CIT 2.2 NA 2.3 STE 2.4 CI E 3.1 TIT 32 NA 33 STI 34. CI	Agent signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR IY-ST-ZII LE ME REET ADDR IY-ST-ZII LE	RESS	ed when reinstating)			DATE	ND DIRECTOR	CTOR ange ange	S IN 12 Addition Addition
Office of the agent. I am agen	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICable  ORS  DELETE  DELETE	(NOTE Registered  13.  E 1.1 III 12 NA 13 STI 1.4 CII 2.2 NA 2.3 STI 2.4 CII E 3.1 TIT 3.2 NA 3.3 STI 3.4 CI E 4.1 TIT	Agent signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR IY-ST-ZII LE ME REET ADDR IY-ST-ZII LE	RESS	ed when reinstating)			DATE	ND DIRECTOR	CTOR ange ange	S IN 12 Addition Addition
Office of the agent. I am SIGNATURE TO STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE	(NOTE Registered  13.  E 1.1 IIT 12 NA 13 STI 2.2 NA 2.3 STE 2.4 CI  E 3.1 TIT 32 NA 33 STI 34. CF  E 4.1 TIT 4.2 NA 4.3 STE 4.4 CII 4.4 CII	Agent signal LE MF REET ADDR LE ME REY-ST-ZIP LE ME REET ADDR FY-ST-ZIP LE ME	RESS DEESS	ed when reinstating)			DATE	ND DIRECTOR	CTOR ange ange	S IN 12 Addition Addition Addition
Office of the agent. I am agen	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DPICable  ORS  DELETE  DELETE	(NOTE Registered  13.  E 1.1 IIT 12 NA 13 STI 2.2 NA 2.3 STE 2.4 CI  E 3.1 TIT 32 NA 33 STI 34. CF  E 4.1 TIT 4.2 NA 4.3 STE 4.4 CII 4.4 CII	Agent sic LE MF REET ADDR LE ME REET ADDR FY - ST - ZII LE ME ME ME ME ME ME ME ME ME M	RESS DEESS	ed when reinstating)			DATE	ND DIRECTOR	CTOR ange ange	S IN 12 Addition Addition
Office of the agent. I am agen	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE	(NOTE Registered  13.  E 1.1 Iff 12 NA 13 STI 1.4 CII 2.2 NA 2.3 STI 2.4 CI E 3.1 TII 3.2 NA 3.3 STI 3.4 CI E 4.1 TIT 4.2 NA 4.3 STE 4.4 CII E 5.1 TII 5.2 NA	Agent signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR FY-ST-ZIP LE ME REET ADDR FY-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME	RESS PRESS	ed when reinstating)			DATE	ND DIRECTOR	CTOR ange ange	S IN 12 Addition Addition Addition
Office of the agent. I am agen	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE	(NOTE Registered  13.  E 1.1 Iff 12 NA 13 STI 1.4 CII 2.2 NA 2.3 STI 2.4 CI E 3.1 TII 3.2 NA 3.3 STI 3.4 CI E 4.1 TIT 4.2 NA 4.3 STE 4.4 CII E 5.1 TII 5.2 NA	Agent signal LE MF REET ADDR LE ME REET ADDR LE	RESS PRESS	ed when reinstating)			DATE	ND DIRECTOR	CTOR ange ange	S IN 12 Addition Addition Addition
Office of the agent. I am SIGNATURE  **Y2.*  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE  DELETE  DELETE  DELETE	(NOTE Registered  13.  E 1.1 Iff 12 NA 13 STI 2.2 NA 2.3 STI 2.4 CI E 3.1 TIT 3.2 NA 3.3 STI 3.4 CT E 4.1 TIT 4.2 NA 4.3 STI 4.2 NA 5.3 STI 5.1 TIT 5.2 NAI 5.3 STI 5.4 CII 5.4 CII	Agent signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR FY-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME	RESS RESS RESS	ed when reinstating)			DATE	ND DIRE Ch Ch	ctor ange ange	S IN 12 Addition Addition Addition Addition Addition
Office of the agent. I am SIGNATURE \$\frac{122}{2}\$  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE	(NOTE Registered  13.  E 1.1 Iff 12 NA 13 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 4.2 NA 4.3 STE 4.1 TIT 5.2 NA 5.3 STI 5.4 CIT 5.4 CIT 6.1 TIT	Agont signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR FY-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME	RESS RESS RESS	ed when reinstating)			DATE	ND DIRECTOR	ctor ange ange	S IN 12 Addition Addition Addition
Office of te agent. I an SIGNATURE  Y2.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE  DELETE  DELETE  DELETE	(NOTE Registered  13.  E 1.1 Iff 12 NA 13 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 4.2 NA 4.3 STE 4.1 TIT 5.2 NA 5.3 STI 5.4 CIT 6.2 NAI 6.3	Agont signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR TY-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME	RESS RESS RESS	ed when reinstating)			DATE	ND DIRE Ch Ch	ctor ange ange	S IN 12 Addition Addition Addition Addition Addition
Office of the agent. I am SIGNATURE  172.  171.  171.  171.  172.  171.  171.  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed DP WHITEHEAD, F 10845 NW 50	namin of registered a OFFICERS AF	gent and tille dia	DELETE  DELETE  DELETE  DELETE	(NOTE Registered  13.  E 1.1 Iff 12 NA 13 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 4.3 STI 4.4 CIT 5.2 NAI 5.3 STI 5.4 CIT 6.2 NAI 6.3 STI 6.3 STI 6.4 NAI 6.5 STI 6.5 NAI 6.5 STI 6.5 NAI 6.5 STI 6.5 NAI 6.5 STI	Agont signal LE MF REET ADDR Y-ST-ZIP LE ME REET ADDR FY-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR Y-ST-ZIP LE ME	RESS RESS RESS	ed when reinstating)			DATE	ND DIRE Ch Ch	ctor ange ange	S IN 12 Addition Addition Addition Addition Addition