## 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 #
1. Corporation Name S67241

(7)

SOUTHERN CONVENTION SERVICES, INC.

**FILED** Feb 03 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address				i smaitach tin biett idate tibrt dent find bent fint bintt bint bint bint bint bint biblt iftt
1115 NORTHEAST 9TH AVENUE		1115 NORTHEAST 9TH AVENUE				
FORT LAUDERDALE FL 33304		FORT LAUDERDALE FL 33304				DO MOT MUNICIPALITY OF A OF
						DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified
						07/18/1991
2. Principal P	lace of Business	2a. Mailing Address			<del> </del>	4. FEI Number Applied For
21		26				65-0272138 Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.				¢0.75 A 4884
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees	
Žip	Country	Zφ	Cou	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30	30		Personal Property Tax due June 30. 🛣 Yes 🔲 No
9. Name and Address of Current Registered Agent				81		10. Name and Address of New Registered Agent
	ARSON, K.A.				Name	
	5 N.E. 9TH AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)
F0	RT LAUDERDALE FL 33304					· · · · · · · · · · · · · · · · · · ·
				83		
				84	City	FL 85 Zip Code
11 Pursuant i	to the provisions of Sections 607.05	02 and 607 1608. Florida Ciato	dee the e	hove	named core	
11. Pursuant to the provisions of Soctions 607,0502 and 607,1508, Florida Statules, 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 Statules.						
SIGNATURE Signature, typed or profed harne of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
12.	<del></del>	ND DIRECTORS	13.	u ngo	in a gridioro reigo	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	☐ DELET <b>E</b>	LETE 1.1 TITL			Change Addition
NAME	PEARSON, KAYE A.		1.2 N	AME		
STREET ADDRESS	1115 NORTHEAST 9TH AVE	•	1.3 \$	TREET.	ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY - ST - ZIP		r-ZIP	
TITLE	D	☐ DELETE	DELETE 2.1 TIT			☐ Change ☐ Addition
NAME	PEARSON, KAYE A.		2.2 N	AME		
STREET ADDRESS	1115 NORTHEAST 9TH AVE	•	2.3 S	FREET .	ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL		2.40	ITY-S	T-ZIP	
TITLE	. DELETE		3.1 TI	3.1 TITLE		Change Addition
NAME			3.2 N	AME	1	İ
STREET ADDRESS			3.3 \$1	TREET (	AODRESS	
CITY-ST-ZIP			3.4. C	ITY-S	T-ZIP	
TITLE		☐ DELETE	4.1 TI	TLE		Change Addition
NAME			4. 2 N	AME		
STREET ADDRESS			4.3 S1	TREET A	ADDRESS	
CITY-ST-ZIP			4.4 CI	1Y-ST	- 21P	
TITLE		DELETE	5.1 Tr			☐ Change ☐ Addition
NAME			5.2 N/	AME		
STREET ADDRESS			5.3 \$1	rreet a	ADDRESS	
CITY-ST-ZIP				1Y-S1	- ZIP	
TITLE		☐ DELETE	6.1 TI			☐ Change ☐ Addition
NAME	•		5.2 N/	AME		
STREET ADDRESS			6.3 ST	REET	ADDRESS	
CITY OF 710			6.4.00	TU OT	700	

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.