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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 14 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

S71649

(5)

BULLSEYE, INC. OF THE PALM BEACHES

Principal Place	of Business	Mailing Address		- I RODINOM NA BORON HERE BINN ONDIO	TAIN BIBNI BIBNI BIBNI BIBNI BIBNI BIBNI IBBN
4900 GODFREY ROAD CORAL SPRINGS FL 33067 US		4900 GODFREY ROAD CORAL SPRINGS FL 33067 US		DO NOT WRITE	IN THIS SPACE
00		50		3. Date Incorporated or Qualified	
				08/07/1991	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0338557	Not Applicable
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		J. Downson	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	<b>├</b> ─	This corporation owes or has pa Personal Property Tax due June	
24	25 Name and Address of Currel	29 Anni Registered Agent	30	10. Name and Address of New Fle	
	<del></del>	it negistered Agent	81 Name	10. Hame and radioss of New York	giotorea Agent
BULL, CHARLES H					
4900 GODFREY ROAD			82 Street Add	dress (P.O. Box Number is Not Acceptab	ile)
U	DRAL SPRINGS FL 33067		63		
			<b>84</b> City		FL 85 Zip Code
44 Pureuant to	the provisions of Sections 607 050	12 and 607 1508. Florida Sta	Tules, the above-named con	rooration submits this statement for the o	urpose of changing its registered
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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
agent. I an	n tamiliar with, and accept the oblic	jations of, Section 607.0505,	Florida Statutes.		
SIGNATURE 2	Signature, typed or printed name of registered ag	out as distille if annie white (A)	IOTE: Registered Agent signature requ	ired when (einstating)	DATE
12.		D DIRLCTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE		Change Addition
NAME	BULL, CHARLES H		1.2 NAME		
STREET ADDRESS	4900 GODFREY ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33067	•	1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		i
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		i
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CI1Y-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TiTLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14 I hereby co	ertify that the information supplied v	with this filing cloes not qualif	v for the exemption stated i	n Section 119.07(3)(i), Florida Statutes. I	further certify that the information
indicated of officer or of Block 12 o	on this annual report or supplement dir <b>ect</b> or of the corporation or the rec or <b>Bloc</b> k 13 if changed, or on an atta	ar annual report is true end e eiver or trustee empowered ichment with an address	accurate and that my signat to execute this report as re-	rure shall have the same legal effect as if quired by Chapter 607, Florida Statutes;	and that my name appears in

4/2/100