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 # S76956 (9)

REINCARNATION, INC.

Mailing Address

5377 HIATUS ROAD

Principal Place of Business

5377 HIATUS ROAD

FILED Apr 15 1998 8:00am Secretary of State



SUNRISE FL 3	33351		SUNRISE FL 33351					DO NOT V	VRITE IN THIS S	PACE			
							3.	Date Incorporated or Qual		ST ACL			
2. Principal Place of Business			2a. Mailing Address				4.	4. FEI Number			Applied For		
21			26					65-0284905			Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	5. Certificate of Status Desired Security Fee Required					
City & State			City & State				6.	Election Campaign Financ	ing	\$5.	.00 N	lay Be	
23			28					Trust Fund Contribution Added to Fees					
Zip	Count	ry	Zip Country				8. This corporation owes or has paid the current year intangible						
24	25	29		30			l	Personal Property Tax due	Yes		No		
	g, Name and Addre		Istered Agent		81	Name	10.	Name and Address of Ne	w Registered	agent			
	SKOWITZ, CHARLES	5		- 1	٠,	Iname							
8341 N.W. 53RD CT. Lauderhill Fl 33351				82 Street A			Address (F	P.O. Box Number is Not Acc	eptable)				
					83								
					84	City			FL	85	Zip Co	ode	
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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE													
	Signature, typed or printed nau			OTE Registered	Age	nt signature			DATE			-	
12.	D	OFFICERS AND DIR	DELETÉ	13.	1.5			ADDITIONS/CHANGES TO	OFFICERS AND	DIREC Chai		IN 12 Addition	
TITLE	MOSKOWITZ, CH	ADI EQ		1.2 NA		1					ngo		
NAME	8341 N.W. 53RD			•		ADDRESS							
STREET ADDRESS	LAUDERHILL FL	•		1.4 00		- 1							
CITY-ST-ZIP TITLE	D		DELETE	2.1 TIT		1-211				Chai	nge	Addition	
NAME	MOSKOWITZ, LAI	JRIE	_	2.2 NA							-		
STREET ADORESS	8341 N.W. 53RD			2.3 ST	REET	ADDRESS							
CITY-ST-ZIP	LAUDERHILL FL			2. 4 CI	TY-S	iT-ZIP							
TITLE			☐ DELETE	3.1 T/T	LE					Cha	nge	Addition	
NAME				3.2 NA	ME	i							
STREET ADDRESS				3.3 STI	REET.	ADDRESS							
CITY-ST-ZIP			··	3.4. CI		I-ZIP				, , , , , , , , , , , , , , , , , , , 			
TITLE			☐ DELETE	4,1 T(T	LE					Chai	nge	Addition	
NAME				4. 2 NA	ME	1							
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP			DELETE	4.4 CIT		F-ZIP				Chai	D00	Addition	
TITLE				5.1 TIT		ŀ				L Cria	nge	MODITION	
NAME				5.2 NA		4000000							
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP TITLE			DELETE	5.4 CIT 6.1 TIT		1 - ZIP				Chai	nae	Addition	
1				6.2 NA									
NAME OTDEET ADODESS						ADDRESS							
STREET ADORESS													
CITY-ST-ZIP			. (.)	6.4 CIT			11. 6	on 110 07/2Vi) Florido Stati		atif , the a	4 Al !-	4	

Thereby 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 informatio 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 is, 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 a transfer or on a stackment with an address.

954-141-8957