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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

101

FILED May 07 1998 8:00am Secretary of State

	ŒAN BLVD.	Mailing Address 3541 N.E. OCEAN BLVI JENSEN BEACH FL 34		DO NOT WRITE IN T	
				11/25/1991	
├ ─┐ '	lace of Businoss	2a. Mailing Address		4. FEI Number 65-0291959	Applied For
Suite, Apt	#, etc.	Suite, Apt #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	0	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	9. Name and Address of Curren	t Registered Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
FR	ANKLIN, ELLIOT A		81 Name	10.	<u></u>
5315 LAKÉ WORTH ROAD LAKÉ WORTH FL 33483			82 Street	Address (P.O. Box Number is Not Acceptable)	
			64 City		FL 85 Zip Code
agent. I a SIGNATURE	m familiar with, and accept the obligation of mysterical age. OFFICERS AND	ot and title if applicable (NO	OTE Registered Agent signature 13.	corporation submits this statement for the purpo poration's board of directors. I hereby accept the required when reinstating) ADDITIONS/CHANGES TO OFFICERS	TE .
TITLE	P	DELETE	1,1 TITLE	ADDITIONS/CHANGES TO OFFICEAS	Change Addition
NAME	CLAIRMONTE, KEITH		1.2 NAME		
STREET ADDRESS	3541 N.E. OCEAN BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JENSON BEACH FL 34918		1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		Change Addition
NAME	CLAIRMONTE, AVE		2.2 NAME	·	
STREET ADDRESS	3541 N.E. OCEAN BLVD. JENSEN BEACH FL 34958		2 3 STREET ADDRESS		
CITY-ST-ZIP	ST ST	DELETE	2 4 CITY-ST-ZIP		- Change Addition
TIYLE NAME	HRUZA. JEAN M	Ĉ∎ nereje	3.1 TITLE 3.2 NAME	Toke & Ollien	
STREET ADDRESS	112 N. WARNER DRIVE		3.2 NAME 3.3 STREET ADDRESS	John K Quick 98165 ocean Dave Jense Beach fla 340	
CITY-ST-ZIP	JENSEN BEACH FL 34957		3.4. CITY-ST-ZIP	Main 3 Decan vice	57
TITLE		DELETE	4.1 TITLE	Jense 15 Kach fla 2 4×	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	1	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETÉ	6.1 TITLE		Change Addition
NAME .			6.2 NAME		

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.

LAIRMONTEN 128 198 516-225-3514