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 #

S98253

(5)

STANLEY A. DUBOFF, INC.

FILED
Apr 17 1998 8:00am
Secretary of State

1								
Principal Place of Business Mailing Address						- 1 1001100 1100 10100 101100 10001 10110 1111 1110 1110	JIDII DIBII EI	BAY OLDIR DIDIA IADI
9825 W SAMPLE RD STE 200 CORAL SPRINGS FL 33065		9825 W SAMPLE RD STE 200 CORAL SPRINGS FL 3				DO NOT WRITE IN THIS	SPACE	
30/11/2 3/11/100 12 300			0000	••		3. Date Incorporated or Qualified		
					.,	12/02/1991		
2. Principal F	2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
		Suite, Apt. #, etc.	ite. Apt. #, etc.			65-0299658	\$8.7	Not Applicable 5 Additional
27		├── ┐ '				5. Certificate of Status Desired		Required
City & State		City & State	City & State			6. Election Campaign Financing	\$5.0	00 May Be
Zip	Country Zip Co		Cour			Trust Fund Contribution		ed to Fees
24	25	29	Gountry 30			This corporation owes or has paid the cu Personal Property Tax due June 30.	irrent year Yes	Intangible No
	g. Name and Address of Currer				10. Name and Address of New Registered			
C	DUBOFF, STANLEY A.		1	81	Name			
9825 W SAMPLE RD			l _i	B2	Street Addres	ss (P.O. Box Number is Not Acceptable)	- .	
STE 200				B3				
(CORAL SPRINGS FL 33065]"	5-3				
			[•	B4	City	FL	85 Z	Cip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the abo	ove-	named corpor	ration submits this statement for the purpose on's board of directors. I hereby accept the app	of changin	g its registered
office or r agent. I a	registered agent, or both, in the State Im familiar with, and accept the obliga	of Florida. Such change was a ations of, Section 607.0505, Flo	authorized orida Statu	by t tes.	he corporation	n's board of directors. I hereby accept the ap-	pointment	as registered
SIGNATURE								
				Agent	signature required		D DIDEOT	000 01 10
TITLE	D OF TOLING ANY	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	
NAME			1.2 NAM					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	1		1.3 STREET ADDRESS		DDRESS			
CITY-ST-ZIP			1.4 City	′-ST-	ZIP			
TIFLE		☐ DELETE	2.1 TITL	E			Chang	ge 🔲 Addition
NAME			2.2 NAN					
STREET ADDRESS					DDRESS			
CITY-ST-ZIP			2. 4 CIT		·ZIP		Chang	ne Addition
NAME			3.2 NAM	-			C) Origing	JC AGG/IIG/I
STREET ADDRESS		,	3.3 STR		DDRESS			j
CITY-ST-ZIP			3.4. CITY- 5		- ZIP			
TITLE		DELETE	4.1 TITLE				Chang	je 🔲 Addition
NAME			4, 2 NAM	Æ				
STREET ADDRESS			4.3 STRE		ľ			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S		ZIP		Chana	Addition
NAME		□ office	5.1 TITLE 5.2 NAME				L Chang	e L. Addition
STREET ADDRESS			5.3 STRE		OOBESS			
CITY-ST-ZIP			4					
TITLE		☐ DELETE	5.4 CITY - S				Chang	e Addition
NAME			6.2 NAM	£				1
STREET ADDRESS			6.3 STRE	ET AC	XDRESS			1
CITY-ST-ZIP	artily that the information supplied wi	th this filing docs and supply	6.4 CITY			140 07/0\(\)		

14. I nereby 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.