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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

14. I hereby certify that the information supplied indicated on this annual report or supplied officer or director of the corporation or the full Block 12 or Block 13 if changed, or on an interest in the full block 12 or Block 13 if changed, or on an interest in the full block 12 or Block 13 if changed, or on an interest in the full block 12 or Block 13 if changed, or on an interest in the full block 12 or Block 13 if changed, or on an interest in the full block 12 or Block 13 if changed, or on an interest in the full block 12 or Block 13 if changed in the full block 12 or Block 13 if changed in the full block 12 or Block 13 if changed in the full block 12 or Block 13 if changed in the full block 12 or Block 13 if changed in the full block 13 if changed in the full block 14 or Block 13 if changed in the full block 14 or Block 13 if changed in the full block 14 or Block 13 if changed in the full block 14 or Block 13 if changed in the full block 14 or Block 14 or Block 14 or Block 14 or Block 15 or Bl



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V06870

(2)

| LITTLE | & COMPANY OF PLAN | ITATION, INC. | | |
|---|---|---|---|--|
| Principal Place | e of Business | Mailing Address | | |
| 7980 S. MARCANCO BLVD. PLANTATION FL 33322 | | 7980 S. MARCANCO BLY PLANTATION FL 33322 | VD. | DO NOT WRITE IN THIS SPACE |
| | P | | | 3. Date Incorporated or Qualified |
| 9 Principal Pl | lace of Business | 2a. Mailing Address | | 01/13/1992 4. FEI Number Applied For |
| 21 | | 26 | | 65-0346920 Not Applicable |
| Suite, Apt #, etc. | | Suite, Apt. #, etc. | | — \$8.75 Additional |
| 22 | | 27 | | Certificate of Status Desired |
| City & State | | City & State | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 | Country | Trust Fund Contribution Added to Fees |
| Zip | Country 25 | Zip | 30 | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No |
| 24] | 9, Name and Address of C | 29 Current Registered Agent | 30 | 10. Name and Address of New Registered Agent |
| CAI | RUANA, ARTHUR | | 81 Name | 3 |
| | O S. MARCANCO BLVD. | | 82 Street | t Address (P.O. Box Number is Not Acceptable) |
| PLA | ANTATION FL 33322 | | | (Addition () S. Dox () Market in Not Addition () |
| | | | 83 | |
| | | | 84 City | FI 85 Zip Code |
| 11. Pursuant to office or reagent. I as SIGNATURE | to the provisions of Sections 60 egistered agent, or both, in the m familiar with, and accept the | 07.0502 and 607.1508, Florida Statu State of Horida, Such change was obligations of, Section 607.0505, fi | tes, the above-named authorized by the co- lorida Statutes. | d corporation submits this statement for the purpose of changing its registered imporation's board of directors. I hereby accept the appointment as registered |
| | Signature, typed or pented name of registe | | | re required when reinstating) DATE |
| 12. | OFFICER D | RS AND DIRECTORS DELETE | 1.1 TILLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE NAME | CARUANA, ARTHUR |) In that it | 1.2 NAME | CAPULLA ADDILO |
| STREET ADDRESS | 11901 SW 2ND ST. | | 1.3 STREET ADDRESS | CAPUANA APTHUR 1633 NE 3 CT PTLAND SPOACE, PC 3330 1 |
| CITY-ST-ZIP | PLANTATION FL 33126 | | 1.4 City-St-ZiP | PTIAND GENARE PC 33301 |
| TITLE | | DELETE | 2.1 TrTLE | Change Addition |
| NAME | | | 2.2 NAME | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 2. 4 City - ST - ZiP | |
| TITLE | | L] DELETE | 3.1 TITLE | Change Addition |
| NAME | | | 3.2 NAME | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CITY - ST - ZIP 4.1 TITLE | Change Addition |
| NAME | | | 4. 2 NAME | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | ; |
| CITY-ST-ZIP | _ | | 4.4 CITY - ST - ZIP | |
| TITLE | | ☐ DELET e | 5.1 YHLE | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | Пъдет | 5.4 C(1Y - ST - 7)P | |
| TITLE | | DELFTE | 6.1 TITLE | Change Addition |

6.2 NAME

6.3 STREET ADDRESS

this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information all annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an every or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in active ent with an address