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 # V17818 (8) PREMIER CENTERS, INC.									
FACIVIC	n CENTERS, INC.				}				
Principal Place	of Business	Mailing Address							fi alt ii ildi
2255 GLADLES	S RD.	2255 GLADES RD.							
219A 219A						DO NOT I	VRITE IN TH	HE COACE	
BOCA RATON US	FL 33431	BOCA RATON FL 33431 US			-	3. Date Incorporated or Qual		IIO OF ACL	
		•				02/28/1992			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26				65-0316625			ot Applicable
Suite, Apt. 6	f, 9 1C.	Suite, Apt. #, etc.			f	5. Certificate of Status Desire	o 🗆		Additional
22 City & State		City & State			-+	O Finalisa Comunica Financia			equired
23		28				Election Campaign Finance Trust Fund Contribution	ing .		May Be to Fees
Zip	Country	Zip	Country		$\neg \neg$	8. This corporation owes or h			
24	25	29	30			Personal Property Tax due	June 30.	Yes Y	IJNo.
	9, Name and Address of Curren	t Registered Agent				10. Name and Address of Ne	w Register	ed Agent	
	GHT, WILLIAM L.		61	Name					
	5 GLADES RD.		82	Street	Addres	s (P.O. Box Number is Not Acc	eptable)		
	TE 219A CA RATON FL 33431		83						
ВОС	M IMIUN FL 33431			·		·		· · · · · · · · · · · · · · · · · · ·	
			64	City			F	EL 85 Zip	Code
11. Pursuant to	o the provisions of Sections 607.050; gistered agent, or both, in the State n familiar with, and accept the obliga	2 and 607.1508, Florida Statu	ites, the above	-named	corpora	ation submits this statement for	the purpos	e of changing i	ts registered
agent. I an	n familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes	ine con	poration	is board of directors. I hereby	accept the a	арропплен ая	registered
SIGNATURE									
12.	Signature typed or printed name of registered age OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	11E: Registered Age	nit signature	e required i	ADDITIONS/CHANGES TO	DATI	<u> </u>	RS IN 12
TITLE	D	DELETE	1.1 TITLE		UIC	2 President	3111021101	☐ Change	Addition
NAME	KNIGHT, WILLIAM L.		1.2 NAME	1.2 NAME Y		ark Schreiber			
STREET ADDRESS	2255 GLADES RD, #219A		1.3 STREET ADDRESS		326	55 Gladus Roa	d Suit	re 219 R	l
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-S	1 - ZIP	Boo	a Raton, FL	<u> 33431</u>		
TITLE	DELETE		2.1 TITLE					Change	Addition
NAME OFFICE APPRICAGE			2 2 NAME	Abboroo	}				
STREET ADDRESS CITY-ST-ZIP			2.3 STREET 2.4 CITY - S						
TITLE			3.1 TITLE	11.711.	 	N T. 1		Change	Addition
NAME			3.2 NAME		-			<u>-</u> -	
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY - S	T- ZIP	<u> </u>				···
TITLE		DELETE	4.1 THILE					Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-S 5.1 TITLE	1 - ZIP	 			Change	☐ Addition
NAME		<u> </u>	5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-S	7 - ZIP	<u></u>				
TITLE		DELETE	6 1 TITLE				··· ·	Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET						
CITY_CT_7ID			B A CITY S	T 71D	1				

14. 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 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.

SIGNATURE WILL LA

William Vnlant

3/24/98

FU1-241-1000

FILED

May 11 1998 8:00am

Secretary of State