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 # V21221

(9)

ANNIE HALL & ASSOCIATES, INC.

FILED	
May 11 1998 8:00an	n
Secretary of State	

Principal Plac	ee of Business Mailing Address		T SERVIC BITATO THE PROPERTY OF THE PROPERTY OF THE PROPERTY BITATORY BITAT						
3200 N. FEDR	RAL HWY	ANNIE HALL & ASSOC	INC.						
SUITE 129		3200 N. FEDERAL MWY STE. 129 L 33431 BOCA RATON FL 33431				DO NOT WO	TE IN TURO (ND 1 OF	
BOCA RATON	N FL 33431				O Data	DO NOT WR Incorporated or Qualifie		PACE	
03	US US				1	•	u		
2. Principal P	Place of Business RIPC	25 29 Mailing Address			4. FEIN	16/1992		1 1	pplied For
21 5/		2a. Mailing Address	x 81	0140		OT APPLICABLE			lot Applicable
Sulte, Apt.		Suite, Apt. #, etc.							Additional
22		27			5. Certi	ficate of Status Desired			equired
City & Stat	θ	City & State	*		6. Elect	ion Campaign Financing		\$5.00	May Be
23	OLA RATIN F	28 BUCA 1	471N	P <	Trust	Fund Contribution		•	to Fees
Zip 97	Country_	7.15	Countr	Y	B. This	corporation owes or has	paid the cur	ent year In	tangible
24 33	120 / 0	29 33481-0940	30	0		onal Property Tax due Ju			_] No
	9. Name and Address of Curre	ent Registered Agent		.T	10. Nam	e and Address of New	Registered /	Agent	
	PITAL CONNECTION INC		a.	1 Name					
	7 E VIRGINIA ST		8:	2 Street Add	lress (P.O. B	ox Number is Not Accep	table)		
SU	ITE 1					<u>'</u>	·		
TAI	L lah assee FL 32301		8:	3					
ì			84	4 City	· · · · · · · · · · · · · · · · · · ·			85 Zip	Code
				1			FL	1 1	
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the Sta	502 and 607.1508, Florida Statut	es, the abo	ve-named corp	poration sub	mits this statement for th	e purpose of	changing	ts registered
agent. La	i m fam iliar with, and accept the obli	igations of Section 607.0505, Fi	orida Statut	es.	mon's board	or directors. Thereby act	sepi ine app	onunent as	s registered
SIGNATURE									ĺ
OIGITATIONE	Signature typed or printed name of registered a	gest and title Lapplicable (NOI	E: Registered A	gent signature requi	ired when reinstat	ing)	DATE		
12.		ND DIRECTORS	13.		ADDIT	TONS/CHANGES TO OF			
TITLE	D	☐ DELETE	1.1 TITLE	-				Change	Addition
NAME	HALL, ANN		1.2 NAME				11	4 ~ 5	
STREET ADDRESS	21419 TUDOR DR		1.3 STREE	et address \$	5116	CORONADO	_^(# G E	, , ,
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-	ST-ZIP	BICA	MITIN	FL	224	81
TITLE		☐ DEL e te	2.1 TITLE)				L Change	☐ Addition
NAME		•	2.2 NAME						
STREET ADDRESS			2.3 STREE	ET ADDRESS					
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP					
TITLE		☐ DELETE	3.1 THILE					Change	☐ Addition
NAME			3.2 NAME	[
STREET ADDRESS			3.3 STREE	et address					
CITY-ST-ZIP			3 4. CITY	-ST-ZIP					
TITLE		DELETE	41 TITLE					Change	Addition
NAME			4. 2 NAM	E					
STREET ADDRESS									
CITY-ST-ZIP			4.3 STREE	et address					
			4.3 STREE						İ
TITLE		DELETE		ST-ZIP			<u> </u>	Change	☐ Addition
TITLE NAME		DELETE	4.4 CITY-	ST-ZIP				Change	Addition
		DELETE	4.4 CITY - 5.1 TITLE 5.2 NAME	ST-ZIP				Change	☐ Addition
NAME Street address		☐ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE	ST-ZIP	<u> </u>			Change	Addition
NAME		☐ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	ST-ZIP ET ADDRESS ST-ZIP				☐ Change	Addition
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Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or an attachment with an address.

GNATURE:

4-24-98 561 391-7636

SIGNATURE: X

-29-98 561 391-7636