COR ANNU	PROFIT PORATION JAL REPORT <b>1998</b>			Sandra Secre	ARTMENT OF STATE <b>B. Mortham</b> etary of State F CORPORATIONS	FILED Jan 27 1998 8:00ar Secretary of State	
<ol> <li>Corporation</li> </ol>	MENT # Name ENTER, INC.	V23047	7	(6)			N
Principal Place of Business Mailing Address 87 NE 44TH STREET 87 NE 44TH STREET SUITE 5 SUITE 5 OAKLAND PARK FL 33334 OAKLAND PARK FL 33334					1334	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
Principal Pla	ace of Business		26	ing Address		03/19/1992         Applied I           4. FEI Number         Applied I           65-0329395         Not Appl           S8.75         Addition	icable
City & State	·		27	& State		5. Certificate of Status Desired     5. Certificate of Status Desired     5. Election Campaign Financing     Trust Fund Contribution     Added to Fees	le
Zip	25	ountry ddress of Current	Zip 29	Agent	Country 30	8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent	
BU/1							
87 N SUN	Niello, Rose M Ne 44th Stree Te 5 Kland Park Fl	Т			81 Name 82 Street 83 84 City	Address (P.O. Box Number is Not Acceptable)	
87 N SUIT OAK	ne 44th stree Te 5 Kland Park Fl	T 33334	and 607.15 of Florida. Su tions of, Sec	08, Fiorida Sla ich change wa ilon 607.0505,	82 Street 83 84 City	Address (P.O. Box Number is Not Acceptable)	tered
87 N SUIT OAK • Pursuant to office or re- agent, I arr GNATURE 5	NE 44TH STREE TE 5 KLAND PARK FL o the provisions of egistered agent, or n familiar with, and	T 33334 Sections 607.0502 both, in the State of accept the obligat	t and title if applic	able. (N	82 Street 83 84 City utes, the above-named sauthorized by the com Florida Statutes.	Address (P.O. Box Number is Not Acceptable)           EL         85         Zip Code           corporation submits this statement for the purpose of changing its register oration's board of directors. I hereby accept the appointment as register required when reinstating)         DATE	
87 N SUIT OAK 1. Pursuant to office or re- agent. I arr GNATURE <u>3</u> 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	NE 44TH STREE TE 5 KLAND PARK FL o the provisions of gistered agent, or o familiar with, and Storature, typed or printe D BONIELLO, JC 87 NE 44TH 5	T 33334 Sections 607.0502 both, in the State of accept the obligat Ineme of registered agent OFFICERS AND OFFICERS AND OHN STREET	t and title if applic	able. (N	82     Street       83     84       84     City       sauthorized by the corr       Florida Statutes.       0TE: Registered Agent signature       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS	Address (P.O. Box Number is Not Acceptable)           FL         85         Zip Code           corporation submits this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered when reinstating)         DATE           required when reinstating)         DATE           ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
87 N SUIT OAK	NE 44TH STREE TE 5 KLAND PARK FL o the provisions of gistered agent, or familiar with, and Storature, typed or printe D BONIELLO, JC 87 NE 44TH S OAKLAND PA D BONIELLO, RC 87 NE 44TH S	T 33334 Sections 607.0502 both, in the State of accept the obligat Ineme of registered agent OFFICERS AND OFFICERS AND OHN STREET RK FL OSE MARIE ITREET	t and title if applic	able. (N	82 Street 83 84 City s authorized by the corr Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME	Address (P.O. Box Number is Not Acceptable)	2
87 N SUIT OAK 1. Pursuant to office or re agent. I arr GNATURE <u>5</u> 2. LE ME	NE 44TH STREE TE 5 KLAND PARK FL o the provisions of gistered agent, or familiar with, and Storature, typed or printe D BONIELLO, JC 87 NE 44TH S OAKLAND PA D BONIELLO, RO	T 33334 Sections 607.0502 both, in the State of accept the obligat Ineme of registered agent OFFICERS AND OFFICERS AND OHN STREET RK FL OSE MARIE ITREET	t and title if applic	able. (N S DELETE	82       Street         83       84         84       City         sauthorized by the corr         Florida Statutes.         0TE: Registered Agent signature         13.         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TITLE         2.2 NAME	Address (P.O. Box Number is Not Acceptable)	2 ddition
87 N SUIT OAK	NE 44TH STREE TE 5 KLAND PARK FL o the provisions of gistered agent, or familiar with, and Storature, typed or printe D BONIELLO, JC 87 NE 44TH S OAKLAND PA D BONIELLO, RC 87 NE 44TH S	T 33334 Sections 607.0502 both, in the State of accept the obligat Ineme of registered agent OFFICERS AND OFFICERS AND OHN STREET RK FL OSE MARIE ITREET	t and title if applic	able. (N S DELETE	82     Street       83     84       84     City       100     Sauthorized by the correlation of the cor	Address (P.O. Box Number is Not Acceptable)	2 ddition ddition
87 N SUIT OAK	NE 44TH STREE TE 5 KLAND PARK FL o the provisions of gistered agent, or familiar with, and Storature, typed or printe D BONIELLO, JC 87 NE 44TH S OAKLAND PA D BONIELLO, RC 87 NE 44TH S	T 33334 Sections 607.0502 both, in the State of accept the obligat Ineme of registered agent OFFICERS AND OFFICERS AND OHN STREET RK FL OSE MARIE ITREET	t and title if applic	adde. (N S DELETE DELETE	82       Street         83       84         84       City         sauthorized by the correlation of the sauthorized by the correlation statutes.       10         0TE: Registered Agent signature       13.         1.1       11TLE         1.2       NAME         1.3       STREET ADDRESS         1.4       CITY-ST-ZIP         2.1       TITLE         2.2       NAME         2.3       STREET ADDRESS         2.4       CITY-ST-ZIP         3.1       TITLE         3.2       NAME         3.3       STREET ADDRESS         3.4       CITY-ST-ZIP         4.1       TITLE         4.2       NAME	Address (P.O. Box Number is Not Acceptable)	2 ddition ddition ddition