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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V27164 (5)

Principal Plac		Mailing Address			
POMPANO BEACH FL 33060 US		POMPANO BCH FL 330 US	060	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 04/08/1992	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# atc	Suite, Apt #, etc.		65-0323170	Not Applicable \$8.75 Additional
├		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Z ip	Country	8. This corporation owes or has paid the cu	Added to Fees
24	25		30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Current	Registered Agent	21	10. Name and Address of New Registered	Agent
	DEGUICEIS, MARE		81 Name		
	1109 BALBOA CIRCLE NPT 401		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	BOCA RATON FL 33433		83		
			84 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-named co	prporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	changing its registered
office or r agent i a	egistered agent, or both, in the State om familiar with, and accept the obligation.	of Florida, Such change was a tions of Section 607.0505, Flo	authorized by the corpora orida Statutes.	ration's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Signature, typed or printed name of registered agon	Alove	Registered Agent signature req	outred when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	DEGUICEIS, MARC		1.2 NAME		
STREET ADDRESS	1221 S DIXIE HWY		1.3 STREET ADDRESS	·	
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY - ST - ZIP		
TITLE	VO .	☐ DELETE	2.1 TITLE		Change Addition
NAME	PAPATZANAKIS, JOHN		2.2 NAME		
STREET ADDRESS	1221 S DIXIE HWY		2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DEFELE	3.1 TATLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE		L_J beccie		(Onlinge Addition
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		\
1			4.4 CITY-ST-ZIP		
CITY-SI-ZIP TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		and the second
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CHTY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITL€		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		}

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 changing, or on an attaching it with an address

SIGNATURE:

21-2974

FILED

Mar 10 1998 8:00am

Secretary of State