## 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

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DOCUMENT # V61868 (8)					
PRIVATE <b>P</b> ROVIDER, INC.				ĺ	
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					<u> </u>
Principal Place of Business Mailing Address				r ideli Bildin diibt kindt inlih diibt idii dibit bibit bi	814 WIRIT BIRT BLUT INSL
10480 158TH STREET N P.O. BOX 671					
JUPITER FL 33478 JUPITER FL 33468-0			DO NOT WRITE IN THIS SPACE		
<b>\</b>		US		3. Date Incorporated or Qualified	
				09/04/1992	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26				65-0357354	Not Applicable
Suite, Apt #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22     27					Fee Required
	te .	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
<b>23</b> Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation owes or has paid the curre	Added to Fees
24	25	<u></u>	0		Yes No
	8. Name and Address of Curre		<u> </u>	10. Name and Address of New Registered Ag	73.
RHINE, PATTY 81 Namina Ru L. HUSER					
10480 158TH ST N 82 Street Address				eddraes (P.O. Box Number is Not Acceptable)	
JUPITER FL 33478			830 Lakeshire Pl.		
. 83			83 🔥	North Palm Black	
			84 City	or the fatty record	85 Zip Code
				FL	33408
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of SAston 607.0505, Florida Statutes.					
agent. La	am familiar with and accept the oblin	gation of, Socion 607.0505, Flori	da Statules.	1/23	160
SIGNATURE	Signature typed or press Prior of readering as	Collaboration (NOTE:	Registered Agent signature i	equired when reinstalied)	<i>y</i>
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND L	DIRECTORS IN 12
THTLE	0	DELFTE	1.1 THLE		Change
NAME	RHINE, PATTY	,	1.2 NAME	Man Huser 11830 Lahrshore Pl. Worth Palm Beach, Fl. 3	`
STREET ADDRESS	10480 158TH ST N		1.3 STREET ADDRESS	11830 Lahishore M.	
City-St-ZIP	JUPITER FL	Doute	1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE	L	Change Addition
NAME	{		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
TITLE		DELETE	2 4 CITY-ST-ZIP 31 TITLE		Change Addition
NAME		_	3.2 NAME	_	<u> </u>
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP		
TITLE		DELETE	4,1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City-St-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELFTE	5.1 TITLE	Ł	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	T	Change Addition
		F-1 DEEC+F	6.1 INLE 6.2 NAME	30000258403	3 3/2
NAME Street address			6.2 NAME 6.3 STREET ADDRESS	30000258403 -07/09/9801032004 ***150 00	727
aincei AUUNESS			0.3 SINCEL ADDRESS	###150 00	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.4(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 alterstiment with an address.

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**FILED** 

Jul 07 1998 8:00am

Secretary of State