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 # V66673 (7)

ALLAN A. KOZICH & ASSOCIATES, INC.

May 05 1998 8:00am Secretary of State

FILED



| Principal Place | e of Business | Mailing Address | | | |
|--|--|---|---------------------------|--------------------------------|--|
| 1220 NE 4TH | | 1220 NE 4TH AVENUE | | | |
| FORT LAUDE | RDALE FL 33304 | FORT LAUDERDALE FL 33304 | | | DO NOT WRITE IN THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified |
| | | | | | 09/25/1992 |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number Applied For |
| · | | 26 | ٦ - ١ | | 65-0482674 Not Applicable |
| | | | Suite, Apt. #, etc. | | 69.75 (Additional |
| 22 | | 27 | 27 | | Certificate of Status Desired Fee Required |
| ─ ` ' | | City & State | | | Election Campaign Financing \$5.00 May Be |
| 28 | | | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Count | гу | This corporation owes or has paid the current year Intangible |
| 24 | 25 29 30 9. Name and Address of Current Registered Agent | | 30 | | Personal Property Tax due June 30. Yes No |
| | | nt Hegistered Agent | 8 | 1 Name | 10. Name and Address of New Registered Agent |
| | ZICH, ALLAN | | ° | i ivanie | |
| 1220 N.E. 4TH AVENUE | | | 8 | 2 Street Ac | ddress (P.O. Box Number is Not Acceptable) |
| FT. LAUDERDALE FL 33309 | | | L | | |
| | | | 8 | 3 | |
| | | | 8 | 4 City | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607.050 | 02 and 607.1508. Florida Statu | ites, the abo | ve-named c | orporation submits this statement for the purpose of changing its registered |
| office or r | <mark>egistered agent, or both, in the State manual agent the oblice manual accept the oblice manual acceptance manual acce</mark> | e of Florida. Such change was | authorized | hy the corpo | pration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE | Signature, typod or printed name of registered ag | sent pret title if armicable / NC |) H. Banistered A | pent signature re | equired when reinstaling DATE |
| 12. | | ND DIRECTORS | 13. | gon agnature to | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PSD | DELETE | 1.1 1014 | · T | Change Addition |
| NAME | KOZICH, HAYDEE L | — | 1.2 NAM | | |
| | 1220 N.E. 4TH AVENUE | | | | |
| STREET ADDRESS | FT. LAUDERDALE FL. | | | ET ADDRESS | |
| CITY-ST-ZIP | VID | DELETE | 14 C(TY 21 THTL | | Change Addition |
| TITLE | KOZICH, ALLAN A | | | | C vinige C Notifier |
| NAME | 1220 N.E. 4TH AVENUE | | 2 2 NAM | | |
| STREET ADDRESS | FT. LAUDERDALE FL | | | ET ADDRESS | |
| CITY-ST-ZIP | TI. LAUDENDALE FL | Delete | | '-ST-ZIP | ☐ Change ☐ Addition |
| TITLE | | DELETE | 31 TITLI | l l | ☐ Change ☐ Addition |
| NAME | | 32 | | į. | |
| STREET ADDRESS | | | 3 3 STRE | ET ADDRESS | |
| CITY-ST-ZIP | | | | '-SI-ZIP | |
| TITLE | | ☐ DELETE | 41 1111 | | ☐ Change ☐ Addition |
| NAME | | | 4 2 NAN | IE | |
| STREET ADDRESS | | | 4 3 STRE | ET ADDRESS | |
| CITY-ST-ZIP | | | 4.4 City | -ST-ZIP | |
| TITLE | | DELETE | 51 TITLI | | ☐ Change ☐ Addition |
| NAME | | | 52 NAM | E | |
| STREET ADDRESS | | | 53 STAE | ET ADDRESS | |
| CITY+ST-ZIP | | | 5.4 CITY | -ST-ZIP | |
| TITLE | | DELETE | 6 1 1 ITU | | ☐ Change ☐ Addition |
| NAME , | | | 6.2 NAM | E | |
| STREET ADDRESS | | | 63 STRE | E! ADDRESS | |
| CITY-ST-ZIP | | | 64 City | -ST-ZIP | |
| 14. Thereby o | ertify that the information supplied v | with this filing does not qualify | for the exen | ption stated | I in Section 119.07(3)(i). Florida Statutes. I further certify that the information |
| indicated officer or | on this annual report or supplement director of the corporation or the rec | lat annual report is true and ac ceiver or trustee empowered to | curate and execute thi | tnat my signa s report as r | ature shall have the same legal effect as if made under oath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in |
| Block 12 | or Block 13 if changed, or on an atta | achment with an aridress. | . JADOUIO IIII | e report us to | agence by amprecion of the control of the true my mine appoint in |
| | \cdots |)/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Δ | ν | aladas (OCA) 714 m25 |