

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 242804 (3)
 1. Corporation Name
TERNER'S OF MIAMI CORP.



Principal Place of Business 2337 N.W. 5TH AVE MIAMI FL 33127 US	Mailing Address 2337 N.W. 5TH AVE MIAMI FL 33127 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29 30

3. Date Incorporated or Qualified 12/12/1960	Applied For Not Applicable
4. FEI Number 59-0910225	
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

TERNER, MARCIA
 2337 NW 5 AVE
 MIAMI FL 33127

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	TERNER, DINA	
STREET ADDRESS	5700 COLLINS AVE #6E	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	TERNER, MARCIA	
STREET ADDRESS	5500 COLLINS AVE #902	
CITY-ST-ZIP	MIAMI BCH FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	CALZADILLA, MARCOS	
STREET ADDRESS	7120 SW 107 TERR.	
CITY-ST-ZIP	MIAMI FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	TERNER, MARCIA	
STREET ADDRESS	5500 COLLINS AVE #902	
CITY-ST-ZIP	MIAMI BCH FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	KABAK, IDA	
STREET ADDRESS	12419 N. BAYSHORE DR	
CITY-ST-ZIP	N. MIAMI FL 33181	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	KABAK, ELIAS	
STREET ADDRESS	12419 N. BAYSHORE DR	
CITY-ST-ZIP	N. MIAMI FL 33181	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby 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 changed, or on an attachment with an address.

SIGNATURE: _____ **SIGNATURE REQUIRED** ELIAS KABAK 01/19/98 305-573-0696

CR2E034 (10/97)