## 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 # 600052

(5)

KIRSCH LEVINE AND SINGER P.A.

**FILED** Apr 15 1998 8:00am Secretary of State

1111001	11 PEANIAR	- AND ONGE	19 1 19 10											
Principal Plac	e of Busines	SS		Mailing Address					1 18 0110 1114 00114 001	1 <b>        </b>		AR ALDIA BIBLA BI	[64] [01][1] (\$6]	
801 ARTHUR	GODEREY R	D.		801 ARTHUR GODFREY RD										
#402		•		#402							<del></del>			
MIAMI BCH F	L 33140			MIAMI BCH FL 33140				DO NOT WRITE IN THIS SPACE						
US				US					3. Date incorporated of	or Qualified	1			
2. Principal P	lace of Busi	ness		2a. Mailing Ac	Idress				10/23/1961 4. FEI Number	<del></del>		<del></del>	Applied For	
21				26					59-0940647				Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.									Additional	
22				27				5. Certificate of Status	Desired		T	Required		
City & State				City & State					6. Election Campaign	Financing		\$5.00	0 May Be	
23				28				,	Trust Fund Contribu	tion			d to Fées	
Žip	Country			⊢¬ ' <b>⊢</b> ¬			untry		8. This corporation ow					
24 25 9. Name and Address of Curren				29 30			_		Personal Property T				No No	
			urrent He	gistered Agen		8	11	Name	10. Name and Address	B OT New 1	(egistere	a Agent		
		EPH A M.D.				L		TVBITIC						
801 ARTHUR GODFREY RD.				8			2	Street Addre	ddress (P.O. Box Number is Not Acceptable)					
#402 MIAMI BEACH FL 33140						8:	3							
QVI (A	WII DEMON	1 FL 33140					].							
						84	4	City			FI	<b>85</b> Zip	Code	
11. Pursuant	to the provis	sions of Sections 60	7.0502 and	d 607.1508, Flo	orida Statute	es, the abo	ve-	named corpo	pration submits this statem	ent for the	purpose	of changing	its registered	
office or re agent. I a	<b>egis</b> tered ag <b>m fa</b> miliar w	gent, or both, in the rith, and accept the	State of FI obligation	lorida. Such ch s of, Section 60	ang <b>e w</b> as a 07.0505. Flo	iuthorized <u>t</u> irida Statute	oy t es.	the corporatio	on's board of directors. It	ereby acc	ept the ap	opointment a	is registered	
SIGNATURE					, , , , , , , , , , , , , , , , , , , ,									
	Signature, typed	or printed name of registe			(NOTE		gent	signature required	d when reinstating)		DATE			
12,		OFFICER	IS AND DI		Dr. Ftr	13.			ADDITIONS/CHANG	S TO OFF	ICERS AN			
TITLE	P	1000011 4 /40	OT)	ليا	DELETE	1.1 TITLE						Change	Addition	
NAME		I, JOSEPH A (AS IISLAND BLVD #				1.2 NAME		D00000						
STREET ADDRESS		AI BEACH FL	1008			1.3 STREE								
CITY-ST-ZIP TITLE	14: Minch	III OLMOTTE		П	DELETE	1.4 City- 2.1 Title		ZIP				Change	Addition	
NAME				-		2.2 NAME		ľ						
STREET ADDRESS						2.3 STREE	Et al	DDRESS						
CITY-ST-ZIP						2. 4 CITY	- ST	- ZiP						
TITLE					DELETE	3.1 TITLE						Change	Addition	
NAME						3.2 NAME								
STREET ADDRESS						3 3 STREE	TAL	DDRESS						
CITY-ST-ZIP						3.4. CITY		- ZIP					<u> </u>	
TITLE				ليا	DEL <b>ETE</b>	4.1 TITLE						Change	☐ Addition	
NAME	=					4. 2 NAM								
STREET ADDRESS						4.3 STREE								
CITY-ST-ZIP					DELETE	4.4 CITY-	ST-	ZIP				Change	Addition	
TITLE NAME					VLULIL	5.1 TITLE 5.2 NAME						☐ puside	r ∨oomon	
STREET ADDRESS						5.3 STREE		noness						
CITY-ST-ZIP						5.4 CITY-		i						
TITLE					DELETE	6.1 TITLE	311					Change	Addition	
NAME						6.2 NAME		1				2		
STREET ADDRESS						6.3 STREE		DDRESS						
CITY-ST-ZIP					/	6 CITY-		1						
14. Lhereby c	ertify that th	e information supp	lied with th	is filing does no	ot qualify for	r the exem	ntic	on stated in S	ection 119.07(3)(i), Florid	a Statutes.	I further o	certify that th	e information	
officer or o	director of the or Block 13 i	ne corporation or the changed, of an a	e receive n attachm	o trustee emp nt with an add	Owered o	execute this	re	port as requi	shall have the same legated by Chapter 607, Elorio	da Statutes	; and that	t my name a	ppears in	