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

STREET ADDRESS

CITY-ST-ZIP

**FILED PROFIT** Mar 05 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 646178 **ADMINISTRATIVE SERVICES. INC.** Principal Place of Business Mailing Address 7990 S.W. 117TH AVENUE 7990 SW 117 AVE MIAMI FL 33283-8000 BOX 839000 MIAMI FL 33183-6000 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/26/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1953076 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 図 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 ☐ Yes 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CASTRO, ANTONIO J 7990 S.W. 117TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33183** 83 84 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** Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change Addition QUAINT, DONNA K NAME 1.2 NAME Isabel Gonzalez 7990 SW 117TH AVE STREET ADDRESS 1.3 STREET ADDRESS 7990 SW 117Ave MIAMI FL CITY-ST-ZIP 1.4 City-St-ZIP <u>Miami. FL</u> DELETE TITLE 2.1 TITLE Change Addition GROSSMAN, WILLIAM I NAME 2.2 NAME 7990 S.W. 117TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CtTY-ST-ZIP DELETE Channe ☐ Addition TITLE 3.1 TITLE CASTRO, ANTONIO J. NAME 3.2 NAME 7990 S.W. 117TH AVENUE STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33183** CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition SALTZMAN, DAVID A NAME 4 2 NAME **7990 SW 117TH AVE** STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Addition 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

2/20/08

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 truetee 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 attack with an address.