1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Mar 03, 1999 8:00 am § Secretary of State

03-03-1999 90013 044 ****61.25

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22. Principal Place of Business 23. Mailling Address 26. Sulte, Apt. #, etc. 27. Sulte, Apt. #, etc. 27. City & State 28. City & State 28. City & State 29. Country 30. Name and Address of Current Registered Agent 30. Name and Address of Current Registered Agent 41. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose agent. I arn familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. 28. SIGNATURE Signature, typed or printed name of registered agent and 18 if applicable. 19. Name 30. OFFICERS AND DIRECTORS 31. ADDITIONS/CHANGES TO OFFICERS 32. Street Address Sections submits this statement for the purpose agent. I arn familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and 18 if applicable. 10. Name and Address of New Register Agent agent is above-named corporation submits this statement for the purpose agent. I arn familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and 18 if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS MIAMI BEACH FL 33140 DELETE 1: ITTLE BM MANDIO, ELEANOR SIREET ADDRESS 2858 PINITREE DR. 6 CITY-ST-ZP MIAMI BEACH FL 33140 DELETE 2: STREET ADDRESS 24 CITY-ST-ZP MIAMI BEACH FL 33140 DELETE 2: STREET ADDRESS 2: STREET	\$8.75 April Not See Rec \$5.00 Added to the Agent See Age	plied For It Applicable Additional quired May Be to Fees Code registered gistered
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9. Name and Address of Current Registered Agent 10. Name and Address of New Register 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 UNIT 8 (Light) 84 City F 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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 ap agent, I am familiar with, and accept the obligations of Florida Statutes, the above-named corporation's board of directors. I hereby accept the ap agent, I am familiar with, and accept the obligations Affordia Statutes, the above-named corporation's board of directors. I hereby accept the ap agent, I am familiar with, and accept the obligations of Florida Statutes, the above-named corporation's board of directors. I hereby accept the ap agent, I am familiar with, and accept the obligations of Florida Statutes, the above-named corporation's board of directors. I hereby accept the ap agent, I am familiar with, and accept the obligations of Florida Statutes, the above-named corporation's board of directors. I hereby accept the ap agent, I am familiar with, and accept the obligations of Florida Statutes, the above-named corporation submits this statement for the purpose of Florida Statutes, the above-named corporation's board of directors. I hereby accept the ap agent, I am familiar with and accept the appropriate agent, I am familiar with and accept the appropriate agent and the purpose of Florida Statutes, the above-named corporation with acceptable) 83 UNIT 8 (Light) 84 City 85 (Tity ST (Pin Address) 85 (Pin Address (P.O. Box Number is Not Acceptable) 86 (Pin III 8 above-named corporation submits this statement for the purpose of the appropriate agent and the purpose of the appropriate agent and the purpose of the appropriate agent and the purpose of the appropriate age	85 Zip C of changing its pointment as reg	registered gistered
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OPERATE BATTLE DP		Addition
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63 STREET ADDRESS 2868 PINETREE DA	Change	l l
CITY-ST-ZIP MIAMI BEACH, FL 33140	Change	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Feb. 17,1999 305 883-8051