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

FILED							
998 8:0	00am						
Secretary of State							
(998 8:0						

	MENT # L57415 IMAGE, INC.	(6)				
Principal Plac	e of Business	Mailing Address		····		FAL DIRAH OKEN ANDAK OKOKI 100k
230 PALERMO		230 PALERMO AVE				
2ND FLOOR	, nec	2ND FLOOR				
CORAL GABLE	ES FL 33134	CORAL GABLES FL 331	34		DO NOT WRITE IN THIS	S SPACE
U\$		US			3. Date Incorporated or Qualified	}
9. Principal P	tace of Business	2a. Mailing Address			03/12/1990 4. FEI Number	Applied For
21		26			65-0182703	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
05/	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New Registers	d Agent
	reira, denis 10 BW 154TH CT		L			
	MI FL 33196		8:		ress (P.O. Box Number is Not Acceptable)	
			8:	3		į
			8-	4 City	F	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						
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	gent signature requi	ized when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AT	UD DIRECTORS IN 12
TITLE	D	DELETE	1.1 DILE		ADDITIONS/CHANGES TO OFFICERS AT	Change Addition
NAME	PEREIRA, DENIS		1.2 NAME	,		
STREET ADDRESS	9280 S.W. 154TH COURT		1.3 STRE	ET ADDRESS		1
CITY-ST-ZIP	MIAMI FL		1.4 CITY	ST-ZIP		
TITLE	S	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	PEREIRA, NATALIE		2.2 NAME			
STREET ADDRESS	9280 S.W. 154TH COURT		2 3 STREE	et andress		
CITY-ST-ZIP	MIAMI FL	Dougra	2 4 CITY			D Ohanna D Addition
TITLE NAME	•	DELETE	3.1 TITLE 3.2 NAME	ſ		Change Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STREE	et address		}
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		· ·	☐ Change ☐ Addition
NAME			5.2 NAME	.]		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-			Change
TITLE			6.1 TITLE			Change Addition
NAME Street address			62 NAME	T ADDRESS		
			6.4 CITY-			
CITY-ST-ZIP	artify that the information supplied with	this filing does not qualify			Section 119 07(3)(i) Florida Statutes I further	pertify that the information

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 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:

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