

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

**FILED**

**Aug 10 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # L91530 (0)**

1. Corporation Name  
**14907 SN CORPORATION**



Principal Place of Business <b>14907 NW 7TH AVENUE MIAMI FL 33168</b>	Mailing Address <b>14907 NW 7TH AVENUE MIAMI FL 33168</b>
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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	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified <b>07/30/1990</b>	
4. FEI Number <b>65-0206500</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**LOPEZ, JOSEPH F. ESQ.  
250 BIRD ROAD, SUITE #302  
CORAL GABLES FL 33146**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
FL B5 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	<b>PSTD</b> <input type="checkbox"/> DELETE
NAME	<b>WIENER, STEVEN</b>
STREET ADDRESS	<b>C.O J. LOPEZ-250 BIRD RD. #302</b>
CITY-ST-ZIP	<b>CORAL GABLES FL 33146</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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	

**400002612844**  
-08/11/98--01045--036  
\*\*\*150.00

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

*Steven Wiener*

*Steven Wiener 7/15/98*

CP2E034 (10/97)

**American Accounting, Inc.**

*PPD*

17001 Northeast Sixth Avenue  
North Miami Beach, Florida 33162  
Phone (305) 653-7350  
Fax (305) 652-9503

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July 22, 1998

SECRETARY OF STATE  
ANNUAL REPORTS FILINGS  
DIVISION OF CORPORATIONS  
P.O. BOX 1500  
TALLAHASSEE FLA. 32302-1500

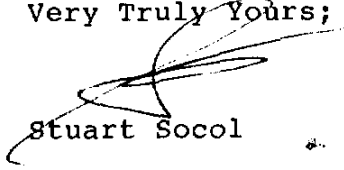
RE: 1998 ANNAL REPORT.

My client 14907 SN Corporation located at 14907 NW  
7th. Ave Miami Fla. 33168 never received the first notice from  
the Secretary of State to pay the 1998 Annual Corporation fee  
of \$ 150.

Therefore, I feel that you should not penalize my client  
the additional \$ 400. for not filing the 1998 Annual Corporation  
Report. Enclosed is a check for \$ 150.00.

Please Review and Advise:

Very Truly Yours;

  
Stuart Socol