

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

**FILED**

**May 01 1998 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P94000065539 (6)**

1. Corporation Name  
**WHO'S LOOKIN' ?, INC.**



Principal Place of Business  
**2495 W 80TH ST #6 HIALEAH FL 33016**

Mailing Address  
**2495 W 80TH ST #6 HIALEAH FL 33016**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**09/01/1994**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 <b>2775 W. 62ND PLACE</b>		26 <b>2775 W. 62ND PLACE</b>		65-0515730		Not Applicable	
22 Suite, Apt. #, etc. <b>#205</b>		27 Suite, Apt. #, etc. <b>#205</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23 City & State <b>HIALEAH, FL</b>		28 City & State <b>HIALEAH, FL</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24 Zip <b>33016</b>		25 Country <b>USA</b>		29 Zip <b>33016</b>		30 Country <b>USA</b>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No							

9. Name and Address of Current Registered Agent  
**PICO, JESUS M  
2495 W 80TH ST #6  
HIALEAH FL 33016**

10. Name and Address of New Registered Agent

81 Name **PICO, JAY F.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**2775 W. 62ND PLACE**

83 **#205**

84 City **HIALEAH** FL 85 Zip Code **33016**

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]* **CHAIRMAN, PRESIDENT**

12. OFFICERS AND DIRECTORS

TITLE	<input checked="" type="checkbox"/> DELETE
NAME	<b>PICO, JESUS M</b>
STREET ADDRESS	<b>2495 W 80TH ST #6</b>
CITY-ST-ZIP	<b>HIALEAH FL 33016</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>PICO, JAY F</b>
STREET ADDRESS	<b>2495 W 80TH ST #6</b>
CITY-ST-ZIP	<b>HIALEAH FL 33016</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>PICO, CLAUDIA A</b>
STREET ADDRESS	<b>2495 W 80TH ST #6</b>
CITY-ST-ZIP	<b>HIALEAH FL 33016</b>
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>PICO, JAY F.</b>
1.3 STREET ADDRESS	<b>2775 W. 62ND PL #205</b>
1.4 CITY-ST-ZIP	<b>HIALEAH, FL 33016</b>
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	

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.

SIGNATURE *[Signature]* **4-18-98 305-903-6634**

CR2E034 (10/97)