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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

| | MENT # P9400 (EY, CALKINS & HALLEY, P.A | 0088149 (7) | | | | |
|---|---|---|--|--|--|--|
| | | | | | | |
| Principal Plac | e of Business | Mailing Address | | - I INDIIINDE IIN KOLIF DIDII DOLLE BEILE DOLLI |) 18181 18184 IIWII 31818 18 11 (8 9 1 | |
| 801 BRICKI | | 801 BRICKELL AVE. | | | | |
| 9TH FLOOR MIAMI FL 33131 | | 9TH FLOOR MIAMI FL 33131 | | DO NOT WRITE IN THE | DO NOT WRITE IN THIS SPACE | |
| MICHIEL C | 1010 | MIAMI FL 33131 | | 3. Date Incorporated or Qualified | 3 31 ACE | |
| | | | | 12/06/1994 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| 21 | | 26 | | 65-0548973 | Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional | |
| City & Stat | e | City & State | | | Fee Required | |
| 23 | • | 28 | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the o | | |
| 24 • | 25 | 29 | 30 | Personal Property Tax due June 30. | Yes No | |
| | 9. Name and Address of Current | · · · · · · · · · · · · · · · · · · · | | 10. Name and Address of New Registere | d Agent | |
| CONFORMION HATCHMANICH SERVICES INC. | | | 81 Name - | THOMAJ V. HALLEY | | |
| *1201 HAYS ST. | | | 82 Street Ad | dress (P.O. Box Number is Not Acceptable) | L FLOON | |
| TALLAHASSEE FL 32301 | | | 83 | OUT BRICKELL HOL, 91. | 1 1001 | |
| ŧ | | | [63] | | | |
| | | | 84 City | n/Am/ F | 85 Zip Code | |
| 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statules, the | | | s the above-named co | progration submits this statement for the nurnose | of changing its registered | |
| office or r agent. La | egi ste red agent, or both, in the State of m fam iliar with, a nd agent the obligati | Florida Such change was au ons of Section 607.0505. Flor | uthorized by the corpor ida Statules. | ation's board of directors. I hereby accept the ap | pointment as registered | |
| SIGNATURE | | THENDS V. HALES | tod Dialotes. | / بر ا– ر | 98 | |
| | Signature, typed or proded name of regulators area to | and the dispptrable (NOTE | Registered Agent signature req | Lured when reinstating) DATE: | <i>7</i> V | |
| 12. | OLEIGERS AND I | · · · · · · · · · · · · · · · · · · | 13. | ADDITIONS/CHANGES TO OFFICERS AF | | |
| TITLE | DPS | ☐ DELETE | 1.1 TATLE | | Change Addition | |
| NAME CERTE ARREST | HALLEY, THOMAS V 801 BRICKELL AVE. | | 1.2 NAME | | | |
| STREET ADDRESS CITY-ST-ZIP | MIAMI FL 33131 | | 1.3 STREET ADDRESS | | | |
| TITLE | Miram 1 L 00101 | DELETE | 1.4 City - St - ZIP 2.1 Title | | Change Addition | |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 2.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 3.1 TITLE | | Change Addition | |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | T OFFICE | 3.4. CITY-ST-ZIP | | | |
| TITLE | | ☐ DÉLETE | 41 TITLE | | ☐ Change ☐ Addition | |
| NAME Street address | | | 4. 2 NAME | | | |
| CITY-ST-ZIP | | | 4.3 STREET ADDRESS | | | |
| TITLE | | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE | | Change Addition | |
| NAME | | | 5.2 NAME | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CI1Y-ST-ZIP | | | |
| TITLE | | DELETE | 6 1 TITLE | | Change Addition | |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | |

14. Thereby 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 13 if changed, or on an attachment with an address.

SIGNATURE.

305 785 6657

FILED

May 19 1998 8:00am

Secretary of State