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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9500004871

WATCHDEAL, INC.

7TH FLOOR

MIAMI FL 33131

Mailing Address Principal Place of Business 1475-ALTON_ROAD 1445 ALTON-ROAD MIAMI BEACH FL 33139-3813 MIAMI-BEACH FL 33141 SISI COUINS Ave. Apt. 928, MIAMI BEACH 3a. Date of Last Report 3. Date Incorporated or Qualified 05/01/1996 01/19/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 5151 COLLINS Same 65-0551810 26 Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees **Trust Fund Contribution** Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Yes 🛣 No 30 Florida Statutes 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 GOULD, RONALD 1110 BRICKELL AVE

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.

83

64

Street Address (P.O. Box Number is Not Acceptable)

SIGNATURE Signature typed or printed harve of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. PD PUSICION Addition ☐ Change DELETE 1.1 TITLE TITLE DEPNER, HILDEGARD 1.2 NAME 1445 ALTON ROADS SISI COLLINS AUR. 928 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33140 1.4 CITY-ST-ZIP CITY-ST-7IP Change Addition DELETE 2.1 TITLE DRUE 22 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2.4 CiTY-ST-ZiP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-7IP Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZiP Addition DELETE Till F 61 TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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 expect this eppir as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the corporation or the receiver or trustee empowered to execute appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FILED

Mar 10 1997 8:00am

Secretary of State

Applied For

Fee Required

Zip Code

Not Applicable