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

PROFIT '
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9500006396 (2)

GREAT INVESTMENTS, INC.					
Principal Plac	e of Business	Mailing Address			GENER BUIDS HIND ISHO SHE 1981
2960 SW 11TH ST. 2960 SW 11TH ST. MIAMI FL 33135 MIAMI FL 33135					WD 054.05
				DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IS SPACE
				01/20/1995	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0584036	Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	 This corporation owes or has paid the 	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curre	ent Hegistered Agent	81 Name	10. Name and Address of New Registers	Agent .
CRUZ, ARNALDO JR.			1 vame		
2960 SW 11TH ST.			82 Street Add	lress (P.O. Box Number is Not Acceptable)	
MI	AMI FL 33135		83		, <u> </u>
			84 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 in	gent and little if applicable. (NO) ND DIRECTORS	15. Registored Agont signature requi	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DS OF TICETORY	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	CRUZ, ARNALDO JR.	Constant Constant	1.2 NAME		Lig onungo
STREET ADDRESS	2960 SW 11TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33135		1.4 CITY - ST - ZIP		
TITLE	P	DELETE	2.1 TITLE		Change Addition
NAME	CRUZ, ARNALDO	-	2.2 NAME		
STREET ADDRESS	2960 SW 11TH ST.		2.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	MIAMI FL 33135		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SY-ZIP			3.4. CITY-ST-ZIP		
TITLE	_	☐ DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	,	Change
NAME			5.2 NAME	\ \1/1	17/2
STREET ADDRESS			5.3 STREET ADDRESS	\ \//	\delta \l
CITY - ST - ZIP		DELETE	5.4 CITY - ST - ZIP		7
TITLE		DELETE	6.1 TITLE	8000024197 -02/03/98010410	TITO Addition
NAME			6.2 NAME	***150.00	11.0
STREET ADDRESS			6.3 STREET ADDRESS	குமுக⊈1⊅ப்* ப்ப	

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 eath; 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.

6.4 CITY - \$1 - ZIP

CICNIATURE.

1.23 80

FILED

Feb 03 1998 8:00am

Secretary of State