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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE



FLORIDA DEPARTMENT OF STATE

Sandra, B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500065950 (4)

CARDINAL MANAGEMENT, INC.									
	THE THE REPORT OF THE PERSON O)	ORINI BANKA ANIAN	6 331 6 1 6 141 4 1312 66 12 36 12	
Principal Plac	e of Business	Mailing Address	···						
ONE S.E. THIRD AVE.		ONE S.E. THIRD AVE.							
17TH FLOOR		17TH FLOOR				5.5.4.6.5.4.6.			
MIAMI FL 33131 US		MIAMI FL 33131 US			2 Data Inger	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
03		03			08/25/1	•	1		
2. Principal Place of Business		2a, Mailing Address			4. FEI Number		·····	Applied For	
21		26			65-06	15346		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1	of Status Desired		\$8.75 Additional	
22		27			S, Commodite	Of Glates Boshed	<u> </u>	Fee Required	
City & State		City & State			· ·	ampaign Financing	<u></u>	\$5.00 May Be	
Zip	Country	28	Country			Contribution		Added to Fees	
24	25	├ -	ю			ration owes or has p roperty Tax due Jur	t and	eni year inlangible Yes 🔲 No	
	9. Name and Address of Current		<u></u>			Address of New P			
• WATKIN, JEFFEY				Name	ok Diobossi	Dichard T			
17TH FLOOR			82	Street A	ok, Richard J. dress (P.O. Box Number is Not Acceptable)				
ONE S.E. THIRD AVE.				One	S.E. Third	Avenue			
MIAMI FL 33131			83	Suit	≥ 1700				
			84	City Mian			FL	85 Zip Code 33131	
11, Pursuant	to the provisions of Sections 607.0502 egistered agent, or both in the State of m familiar with, and ago of the obligate	and 607,1508, Florida Statutes	the above	e-named c	rporation submits th	nis statement for the	purpose of	changing its registered	
agent. I a	m familiar with, and accoult the obligate	ons of, Section 607.0505, Flori	da Statutes	i in corpe	alloris Doard or dire	octors. Thereby acco	ebi ine ab b o	intiment as registered	
SIGNATURE Sond to typic or plant of name of registerical agent and through applicable. (NOTE: Registered Agent signature required							DATE		
		DIRECTORS 13.			· · · · · · · · · · · · · · · · · · ·	CHANGES TO OFF		DIRECTORS IN 12	
TITLE	0	DOELETE	1.1 TITLE		Director/Pr			Change K Addition	
NAME	BA CARDI, FACUNDO L		1.2 NAME						
STREET ADDRESS	ONE S.E. THIRD AVE. 17TH FLOOR		1.3 STREET ADDRESS						
CITY-ST-ZIP	MAMI FL		1.4 CITY- S						
TITLE	D.	☐ DELETÉ	21 TITLE				nt/Sect	etianty & Addition	
NAME OTRECT ADDRESS	CARDONELL, MARLENE ONE S.E. THIRD AVE. 17TH FLOOR		22 NAME CA:		Carbonell,	Martene			
STREET ADDRESS CITY-ST-ZIP	MIAMI FL	UUK	1						
TITLE	D micro	DELETE	2. 4 City - S 3.1 Title		irector/Wi	co Procido	nt /mras	Addition	
NAME	RAZOOK, RICHARD J	•	3.2 NAME		TIECCOI/VI	.ce rrestue	iic/ II Ge	HERPET ZJANON	
STREET ADDRESS	ONE S.E. THIRD AVE. 17TH FLOOR		3.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL		3.4. CITY - S	1 - ZIP					
TITLE		DELETE	4.1 TITLE					Change Addition	
NAME			4. 2 NAME	1					
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP		Decem	4.4 CITY-S	r-zip		· · · · · · · · · · · · · · · · · ·		10)	
TITLE		☐ DFLETE	5.1 TITLE				ι	☐ Change ☐ Addition	
NAME			5.2 NAME	.000000				プラ	
STREET ADDRESS			5.3 STREET	AUDRESS				1111	

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 address

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

DELETE

3/20 /40

***150.00

FILED

Apr 16 1998 8:00am

Secretary of State