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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 17 1998 8:00am Secretary of State

1. Corporatio	e of Business YME BLVD.	Mailing Address 100 N BISCAYNE BLVD SUITE 2600 MIAMI FL 33132		DO NOT WRITE IN THI	
9 Principal P	lace of Business	2a. Mailing Address		11/21/1996 4. FEI Number	Applied For
21 26		-		65-0711424	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		2B		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 9. Name and Address of Cur	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	☐ Yes 【 No
HART, DAVID J 100 N BISCAYNE BLVD. SUITE 2600 MIAMI FL 33132			81 Name 82 Street Ad 83 City	dress (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.6 agistered agent, or both, in the St in familiar with, and accept the ob-	oligations of, Section 607.0505, F	ites, the above-named co authorized by the corpor lorida Statutes. TE Registered Agent signature req	rporation submits this statement for the purpose alion's board of directors. I hereby accept the a	
12.	OFFICERS .	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	MARCHANT, DAVID 100 N BISCAYNE BLVD. S MIAMI FL 33132	UITE 2600	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP M.	23 SE 3rd Avenue, #173 iami, FL 33131	3
TITLE		DELETE	, 2.1 TITLE		Change Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP		Driete	2. 4 CITY-ST-ZiP		Change Addition
TITLE NAME		☐ DEL e te	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		Į
CITY-ST-ZIP			3.4. CITY - ST-ZIP		1
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 ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP		T or re-	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	will that the information or allow	t with this filing does not availed	6.4 CITY-ST-ZIP	n Section 119.07(3)(i), Florida Statutes. I further	

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: