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

DOCUMENT # V6473

(7)

FREEMAN, DAWSON & ROSENBAUM, P.A.

| Principal Place of Business | | Mailing Address | Mailing Address | | | | | 6:6:6 8:8:1 6:5 |))(010((130) |
|-----------------------------|--|-------------------------------------|--------------------|--------------------|-----------------------------------|---|------------|-----------------|-----------------------|
| 3250 MARY ST. | | 3250 MARY ST. | | | | | | | |
| STE 100 MIAMI FL 33133 | | STE 100 Miami FL 33133 | | | DO NOT WRITE IN THIS SPACE | | | | |
| US | | US | | | 3. Date Incorporated or Qualified | | | | |
|] | | | | | | 09/17/1992 | | | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | | A | pplied For |
| 21 | | 26 | 26 | | | 65-0371664 | | N | lot Applicable |
| ! Sulte, ADt. #. etc. | | Suite, Apt. #, etc. | | _ | 5. Certificate of Status Desired | | \$8.75 | Additional | |
| 22 | | 27 | | | | 6. Certificate of status Desired | <u></u> | Fee R | equired |
| City & State | | City & State | - - | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | Added | to Fees |
| Zip | | | Countr | ý | | 8. This corporation owes or has paid the current year Inlangible | | | |
| 24 | 25 9. Name and Address of Curr | 29 | | | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | | |
| | | our vedieraten wholis | 81 | Nar | ne | 10. Name and Address of New N | PAISIEIGO | Agent | |
| | REEMAN, LEWIS B. | | | | | | | | |
| | 50 MARY STREET | | 82 | Stre | et Addre | ess (P.O. Box Number is Not Accepta | ble) | | |
| | E 100 | | 83 | | | | | | |
| MI | AMI FL 33133 | | | | | | | | |
| ļ | | | 84 | City | - | | FL | 85 Zip | Code |
| 11 Pursuant | to the provisions of Sections 607.0 | 1502 and 607 1508. Florida Statut | les the abov | n-nam | ed corp | oration submits this statement for the | | e | its registered |
| office or | registered agent, or both, in the Sta | ate of Florida. Such change was | authorized b | y the | corporation | on's board of directors. I hereby acce | pt the app | pointment as | registered |
| 1 | am tamiliar with, and accept the ob- | ilgations of, Section 607.0505, Fit | orida Sialule | 15. | | | | | |
| SIGNATURE | Signature, typed or printed name of registered a | agent and little if applicable (NOT | E Registered Ac | noia Ins | ture require | ed when reinstaling) | DATE. | | |
| 12. | | AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFI | CERS AN | D DIRECTO | RS IN 12 |
| TITLE | 1 | ☐ DELETE | 1.1 TITLE | 1.1 TITLE | | | | Change | Addition |
| NAME | FREEMAN, LEWIS B. | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 3250 MARY STR, STE 100 | 1.3 | | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | MIAMI FL | MIAMI FL | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | DP | DP DELETE 2.1 | | | _ | | _ | Change | Addition |
| NAME | DAWSON, RAQUEL V. | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 3250 MARY STR, STE 100 | | 2.3 STREET ADDRESS | | is | | | | |
| CITY-ST-ZIP | MIAMI FL | | 2. 4 CITY- | 2. 4 CITY-ST-ZIP | | : ' | | | |
| TITLE | DELETE 3.1 | | 3.1 TITLE | | 1 | | | Change | Addition |
| NAME | | | : 3.2 NAME | | | | | | |
| STREET ADDRESS | | | 33 STREE | r addre: | SS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY - | S1- <i>7(</i> P | | | | | |
| TALE | | ☐ DELETE | 4.1 TITLE | | | | | L. Change | ☐ Addition |
| NAME | | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRES | | is | | | | |
| CITY-ST-ZIP | | Dougrap | 4.4 CITY-: | ST-ZIP | | | | | 4.400 = |
| TITLE | | DELETE | 5.1 TITLE | | | | | Change | L. Addition |
| NAME | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 5.3 STREE | | is | | | | |
| CITY-ST-ZIP | | DELETE | 5.4 CITY-1 | ST-ZIP | + | | | Chagge | Addition |
| TITLE | | | 6.1 TITLE | | | | | ∟ Change | - Magarion |
| NAME CTREET ADDRESS | | | 6.2 NAME | . Abore | <u>"</u> | | | | |
| STREET ADDRESS | | | 6.3 STREET | | ,3 | | | | |
| | | | | | | | | | |

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 of 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 for an attachment with an address.

Malau envous

FILED

Feb 03 1998 8:00am

Secretary of State