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 # P95000001992 (3)

GENERAL ORDER MANAGEMENT SERVICES, INC.

Principal Plac	e of Business	Ma	Mailing Address				1 14011501 (12 1016) 2011 4011 4011 6011 6011 6011		#110 H#1 1801
617 W 46TH ST			617 W 46TH ST						
MIAMI BEACH FL 33140		MI	MIAMI BEACH FL 33140				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							01/09/1995	_	
	Place of Business	2a.	Mailing Address				4. FEI Number		Applied For
21		26					65-0546840		Not Applicable
Sulte, Apt.	#, etc.	├	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
22 City & State		27	City & State				5 Floation Compaign Singapoing		<u> </u>
23	Ө	<u> </u>	28				8. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country		Zip	Co	untry		8. This corporation owes or has paid the cur		
24	25	29		30					□ No
	9. Name and Address of Curre	ent Regist	ered Agent				10. Name and Address of New Registered	Agent	
LO'	WENSTEIN, HENRY A				81	Name			
617 W 46TH ST			82 Street A			Street Addr	dress (P.O. Box Number is Not Acceptable)		
MIA	AMI BEACH FL 33140					 			
					83				
					84	City	FL	85 Zip	o Code
44 Dureupat	to the provisions of Sactions 607 N	39 bne 903	07 1508 Florida Statu	tee the s	- pove	e-named corn		f changing	its registered
office or r	registered agent, or both, in the Sta	ile of Florid	Ja. Such change was	authorize	id by	y the corporati	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	ointment a	is registered
	im familiar with, and accept the obt	igations or,	, Section 607.0505, Fi	lorida Sta	tutes	8.			
SIGNATURE	Signature, typed or printed name of registered a	agent and title i	if applicable (NO	1E: Registere	ad Age	ent signature require	red when reinstating) DATE		
12.	OFFICERS A	ND DIREC	TORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D		DELETE	1.1 T	ITLE			☐ Change	Addition
NAME	LOWENSTEIN, HENRY A			1.2 N	IAME				
STREET ADDRESS	617 W 46TH ST			1.3 S	TREET	I ADORESS			
CITY-ST-ZIP	MIAMI BEACH FL 33140		T DELETE		CITY-S	ST-ZIP		T Change	Addition
TITLE	D		☐ DELETE	2.1 7				☐ Change	Addition
NAME	RONALD E HILL	TEDDAC	r		IAME				
STREET ADDRESS	10330 SOUTHWEST 103RD	TERRAUI	E			ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL		DELETE	2.4 (3.1 T		ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			_ Steele		IAME			U. U	
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP						ST-ZIP			
TITLE	<u></u>		DELETE	4.1 T		31-2.1		Change	Addition
NAME					NAME				
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP				4.4 0	OTY-S	ST-ZIP			
TITLE			☐ DEL€TE	5.1 T	ITLE			☐ Change	Addition
NAME				5.2 N	IAME				
STREET ADDRESS				5.3 S	TREET	T ADDRESS			
CITY-ST-ZIP				5.4 C	CITY-S	ST - ZIP			
TITLE			☐ DELETE	6.1 T	ITLE			☐ Change	Addition
NAME				6.2 N	IAMÉ				
STREET ADDRESS				6.3 S	TREET	ADDRESS			

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 with an address.

CITY-ST-ZIP

2-10-98

FILED

Mar 17 1998 8:00am

Secretary of State