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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90017 001 \*\*\*750.00

DOCUMENT # J85741

1. Corporation Name 88 ACRES, INC.



Principal Place of Business: % MAX M. HAGEN, 3990 SHERIDAN ST., #104, HOLLYWOOD FL 33021, US

Mailing Address: % MAX M. HAGEN, 3990 SHERIDAN ST., #104, HOLLYWOOD FL 33021, US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-23) and 2a. Mailing Address (26-30) fields.

3. Date Incorporated or Qualified: 07/29/1987

4. FEI Number: 65-0095653

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax: Yes  No

9. Name and Address of Current Registered Agent: HAGEN, MAX M., 3990 SHERIDAN STREET, #104, HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent (81-85) fields.

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 (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

1. PD BETORET, FRATERNO VILA, 3990 SHERIDAN STREET #104, HOLLYWOOD FL

2. S HAGEN, MAX M., 3990 SHERIDAN ST #104, HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11-14, 21-24, 31-34, 41-44, 51-54, 61-64 fields for title, name, street address, and city-st-zip.

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, with all other like empowered.

SIGNATURE: [Signature] 1/6/89 (954) 987-0515 Date Daytime Phone #

CR2E034 (11/98)