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

FILED PROFIT Apr 20 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS **1998** DOCUMENT # **SOUTH DADE UTILITIES. INC.** Principal Place of Business Mailing Address 7560 NW 107TH AVENUE 76900 NW 107TH AVENUE **MIAMI FL 33172** MIAMI FL 33172 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/13/1957 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-0810526 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes or has paid the current year Intangible X Yes 24 25 28 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name WATSKY, MORRIS J. ESQ. VP- Finance 700 NW 107TH AVENUE 82 Street Address (P.O. Box Nur 4TH FLOOR **MIAMI FL 33172** 83 84 City Miami s of Sections 607 0902 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 and accept the foligations of, Section 607.0505, Florida Statutes.

Cubin Rubin**

Cubin Rubin**

**The corporation of the purpose of changing its registered and accept the purpose of changing its registered and accept the foligations of, Section 607.0505, Florida Statutes.

Cubin Rubin**

Cubin Rubin**

The corporation of the purpose of changing its registered and accept the pu 11. Pursuant to the prov office or registered agent. I am familiar KubiN SIGNATURE d agent and title II applicable (NOTE: Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change ☐ Addition MILLER, STUART A. 1.2 NAME **700 NW 107TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP VD DELETE TITLE ☐ Change Addition 2.1 TITLE Miller, LeonARD 700 NW 107 AU **BOLOTIN, IRVING** NAME 2.2 NAME 700 NW 107TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS **M**IAMI, FL 00000 Miami FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DS DELETE 3.1 TITL€ Addition RUBIN, Shelly The IVW 107 AUE **COLE. ROBERT B** NAME 3.2 NAME 700 NW 107TH AVENUE STREET ADDRESS 3.3 STREET ADDRESS Miami FL MIAMI, FL 00000 33/72 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change SAJONTZ, Steven J 760 NW 107 AUE NAME **PEKOR, ALLAN J** 4. 2 NAME STREET ADDRESS 700 NW 107TH AVENUE 4.3 STREET ADDRESS 93172 MIAMI, FL 00000 miami CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change 5.1 TITLE **SIERRA, KATHLEEN E.** me Mickle, J.T. NAME 5.2 NAME 700 N.W. 107 AVENUE Miami FL 3 STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETÉ TATLE 6.1 TITLE

6.4 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.

6.3 STREET ADORESS

6.2 NAME

STREET ADDRESS

CITY-ST-ZIP

SALEDA, ME

MIAMI, FL 00000

700 NW 107TH AVENUE

nous

mc mickle 3/25/98 200/100-2000

Jordan, Mangaret 760 NW 107 AVE

FL

33/72

Miami