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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

269188

(9)

BENAMOR INC

FILED Apr 03 1998 8:00am Secretary of State



Principal Place of Business		Mailing Addres	5			e tangen einen merid inicht trober enter unts alfalf bider diefel mittle diefer 1881		
281 MIRACLE MILE			281 MIRACLE MILE			i		
CORAL GABLES FL 33134		CORAL GABLES FL 33134				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	113 SFACE	<u>-</u>
						04/22/1963		1
9 Principal P	lace of Business	2a. Mailing Add	1000			4. FEI Number		applied For
21	lace of Edsiness	 	1033			59-1004197		ot Applicable
Suite, Apt.	# etc	Suite Apt #	Suite, Apt. #, etc.					Additional
22		 	27			6. Certificate of Status Desired		Required
City & State	e		City & State			6. Election Campaign Financing		
23	-	├ ─┐	28			Trust Fund Contribution		May Be
Zip	Country		Zip Country			8. This corporation owes or has paid the		
24	25	29	201	30		Personal Property Tax due June 30.		No
<u></u>	g. Name and Address of Cur		100	——		10. Name and Address of New Register		=
EH	RUCH, MAURICE	· · · · · · · · · · · · · · · · · · ·		81	Name			
	1 MIRACLE MILE							
	PRAL GABLES FL 33134		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)		Į.
CO	PRINC CARDLES FL 33 134			63				
				84	City		85 Zip	Code
		100 1007 1100 E	T- Oil to a					<u> </u>
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.								
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 tille if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.								
12.	PD	···	ELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change	
	EHRUCH.MAURICE	٠	CCL IC				□ change	LI Addition
NAME	281 MIRACLE MILE			1.2 NAME				ļ
STREET ADDRESS				1.3 STREET				i
CITY-ST-ZIP	CORAL GABLES FL		ELETE	1.4 CITY-S	T-ZIP		Change	Addition
TITLE	VD	L L		2.1 TITLE			☐ Criange	LI ADDIIIDII
NAME	EHRLICH, GARY			2.2 NAME				
STREET ADDRESS	281 MIRACLE MILE		ł	2.3 STREET	1			Į.
CITY-ST-ZIP	CORAL GABLES FL			2. 4 CITY - 5	ST-ZIP			
TITLE	STD		ELETE	3.1 YITLE			Change	Addition
NAME	EHRLICH,BENA		ľ	3.2 NAME				
STREET ADDRESS	281 MIRACLE MILE			3.3 STREET	ADDRESS			1
CITY-ST-ZIP	CORAL GABLES FL			3.4. CITY - S	ST-ZIP			
TITLE			ELETE	4.1 TITLE]		☐ Change	Addition
NAME				4. 2 NAME	1			Į.
STREET ADDRESS				4.3 STREET	ADDRESS			ſ
CITY-ST-ZIP				4.4 CITY - S	T-ZIP			
TITLE			ELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				ŀ
STREET ADDRESS				5.3 STREET	ADDRESS			
CATY-ST-ZIP				5.4 CITY-S	T- ZIP			
TITLE			ELETE	6.1 TITLE			Change	Addition
NAME				6.2 NAME)		_	ì
STREET ADDRESS				6.3 STREET	ADDRESS			ļ
CITY-ST-ZIP				6.4 CITY-S				j
ALL L. O.L. VIL.				U.7 UILL 10	7 EH			

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.

SIGNATURE: GARY EHRLICH

1/10/98

305-444-1010