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

PROFIT CORPORATION **ANNUAL REPORT**

Sandra B. Mortham .

Secretary of State

FILED May 07 1998 8:00am Secretary of State

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VERAS, FRANCISCO 1021 Nr. 178 TERRACE N. MAMI BEACH FL 33162 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 City FL 86 Zip Code 87 Street Address (P.O. Box Number is Not Acceptable) 88 City FL 86 Zip Code 89 Street Address (P.O. Box Number is Not Acceptable) 89 Address of Receiver and Street Rec		Country		Country		
VERAS, FRANCISCO 1021 NE 175 TERRACE N. MIAMI BEACH FL 33162 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 89	24			30	Personal Property Tax due June 30.	Yes No
102 IN E 178 TERRACE N. MIAMI BEACH FL 33162 82 Street Address (P.O. Box Number is Not Acceptable) 83 STREET ADDRESS COTY-51-2P TITLE WRAM STREET ADDRESS COTY-51-2P TITLE WRAM STREET ADDRESS COTY-51-2P TITLE WAS STREET ADDRESS COTY-51-2P TITLE Change Addition STREET ADDRESS COTY-51-2P TITLE CHANGE ST			nt Registered Agent		10. Name and Address of New Registered A	gent
### Presuant to the provisions of Sections 607 05:02 and 607 15:08, 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 are familiar with. And accept the obligations of, Section 607 05:05, Florida Statutes. #### Signature time of trug-invalid agent and tale if a physible.	102	1 NE 178 TERRACE		82 Street	Address (P.O. Box Number is Not Acceptable)	
15. Provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I are familiar with, and accept the obligations of, Section 607 05:05, Florida Statutes. SIGNATURE				84 City		85 Zip Code
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14. I hereby certify that the information supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this angular report or supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this angular report or supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this angular report or supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this angular report or supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that I am an indicated on this angular report or supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(ii).		ertify that the information supplied	with this time does not qualify fo		d in Section 119.07(3)(i), Florida Statutes. I further cert	fy that the information

indicated on this annual report or supplemental aproal report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a officer or director of the corporation or the recover 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 infacthment with an address.

4-8-98 305 687-8266