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 #

330049

(8)

EROGOL CORP.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						i Bil atali aidis didil didir iddi
1600 WEST AVE 1600 WEST AVE						
MIAMI BEACH FL 33139		MIAMI BEACH FL 33139	MIAMI BEACH FL 33139		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					05/14/1968	
2, Principal Place of Business 2a. Mailing Address				·	4. FEI Number	Applied For
21	26				59-1213913	Not Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & Stat	City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23	28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	y	8. This corporation owes or has paid the	
24	25		30		Personal Properly Tax due June 30.	Yes No
	g, Name and Address of Curr	ent Registered Agent	81	Name	10. Name and Address of New Register	ed Agent
	GOLDMAN, YETTA					
1600 WEST AVENUE #401			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI BEACH FL 33139			02			
i			83	ĺ		
			84	City		85 Zip Code
				<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 Stautes.						
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE:	Registere Ag	ent signature regu	pred when reinstating) DATE	
12.		AND DIRECTORS	13.	- <u></u> i	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	0	☐ DELETE	1.11 LE			☐ Change ☐ Addition
NAME	GOLDMAN, YETTA		1.2 ME	1		
STREET ADDRESS	230 174TH STREET		1.3 EEE	ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		1.4 Y-9	ST-ZIP		
TITLE	D	DELETE	2.1 E			Change Addition
NAME	ROTHBAUM, MINNIE		2.2 Æ			į
STREET ADDRESS	230 174TH ST.		2.3. (E)	ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		2.4 Y-	ST - ZIP		
TITLE	D	DELETE	3.1			Change Addition
NAME	ROTHBAUM, ANA	/ `	3.2 €			
STREET ADDRESS	2655 COLLINS AVENUE		3.3 E	ADDRESS		}
CITY-ST-ZIP	MIAMI BEACH FL		3	ST - 21P		
TITLE	ST	DELETE	4.			Change Addition
NAME	ERTAG, SALLY		4			
STREET ADDRESS	1600 WEST AVENUE		4	ADDRESS		ì
CITY-ST-ZIP	MIAMI BEACH FL			T-ZIP		
TITLE	P	☐ DELETE	5.1			☐ Change ☐ Addition
NAME	GUMPEL, SHARON		52 ME	ļ		
STREET ADDRESS	3318 OTTAWA LANE		53 SHEET	ADDRESS		
CITY-ST-ZIP	COOPER CITY FL		5.4 CIY - S	T-ZIP		
TITLE		☐ DELETE	6.1 T& E			Change Addition
NAME			6.2 NJME	ĺ		
STREET ADDRESS			6.3 SREET	ADDRESS		
CITY-ST-ZIP			6.4 CM - S	T - ZIP		
		1 20 at 1 21 and 1 at 1 at 1 at 1 at 1			0-10-110-01000-01000-010-010-010-010-01	

I hereby certify that the information supplied with this filling does not qualify for the eximption 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or

305) 672-7891