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 # 420145

(5)

FILED May 06 1998 8:00am Secretary of State

Principal Plac	F OF Business	Mailing Address 12000 BISCAYNE BLYD STE. 705 5 0 9 N. MIAMI FL 33181		DO NOT WRITE IN T	
US	σ^{\prime}	US		3. Date Incorporated or Qualified	
				03/02/1973	
2. Principal P	Place of Business	2a. Mailing Address		4, FEt Number	Applied For
21		26		59-1464424	Not Applicable
Suite, Apl.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		
24	25	29	30	8. This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
E4	9. Name and Address of Cur		1901	10. Name and Address of New Registe	
			81 Name	141 Linning Brid Linds on at 110th 1108(910	
	IGHT, PAUL				
120	000 BISCAYNE BLVD		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
	E 708 509		00		*****
NO	RTH MIAMI FL 33181		83		
			84 City		- 85 Zip Code
					-L 3 Zip Code
SIGNATURE	Signature, typed or punted name of regulered OFFICERS A	Tage ht and little if apoleoable (NC AND DIRECTORS	DTE: Registered Agent signature requ	olred when reinstaling) ADDITIONS/CHANGES TO OFFICERS	
TITLE	PO	☐ DELETE	11 TOLE	<u> </u>	Change Addition
NAME	12.2 <u> </u>	509	1.2 NAME		
STREET ADDRESS	12000 BISCAYNE BLVD., #	DV/	1.3 STREET ADDRESS		
	N. MIAMI FL 33181				
CITY-ST-ZIP		DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE	STD LEIGHT I VAIN	☐ DETEIF	2.1 TITLE		CHARGE C Addition
NAME	LEIGHT, LYNN	re 120G	2.2 NAME		
STREET ADDRESS	12000 BISCAYNE BLVD., #	1990 S 07	2.3 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI FL 33181		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	1		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DEL et e	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS	}		4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4 4 C(TY - ST - ZIP		Change Addition
TITLE	ļ	☐ per¢ i€	5 1 TITLE		CT change TT Modifion
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		
TITLE]	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
OTHER BUILDING					
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 City-St-Zip		

Indicated on this armual report or supplied with mist limit does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armual report or suppliemental 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 this 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 Johanged, or on an attachment with an address.

(305)89/3895