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

Apr 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (5) 546772 JUST A TRIM, INC. Principal Place of Business Mailing Address 18240 W DIXIE HWY 18240 W DIXIE HWY NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>08/22/1977</u> 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For Not Applicable 26 59-1769056 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Zip Country Ζıp Country This corporation owes or has paid the current year Intangible **Z** √es □ No 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name REICHENBAUM, MARK 18240 W DIXIE HWY Street Address (P.O. Box Number is Not Acceptable) 82 **NORTH MIAMI BEACH FL 33160** 83 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Addition DELETE Change 1.1 TITLE TITLE PD REICHENBAUM, MARK 1.2 NAME NAME 18240 W DIXIE HWY 1.3 STREET ADDRESS STREET ADDRESS N. MIAMI BEACH FL CITY-ST-Z#P 1.4 CITY - ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE REICHENBAUM, CANDACE 2.2 NAME NAME 18240 W DIXIE HWY 2.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI BEACH FL CITY-ST-ZIP 2. 4 CITY - ST- ZIP Addition DELETE ☐ Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZiP CITY - ST - ZIP Change Addition TITLE ☐ DELETE 6 1 TITLE MAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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MARIX RECHENDALM

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.

CITY-ST-ZIP

SIGNATURE: \

**FILED** 

305-933-3719