Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90006 024 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 547739

1. Corporation Name

Principal Place	AND BLVD. #1701 CTR	Mailing Address 9130 S. DADELAND BLVD. # TWO DATRAN CTR MIAMI FL 33156	1701	· -	DO NOT WRITE IN THI		
MINIMI TE 00/30					3. Date Incorporated or Qualifed 09/27/1977		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	olied For
21 26					59-1769450	Not	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	-		5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State 28		City & State	¬ '		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip	Country Zip 29 30			ry	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No		
24	9. Name and Address of Currer	1	1		10. Name and Address of New Registere	d Agent	
			8	1 Name			
FRESHMAN, JERALD A.				2 Street Add	dress (P.O. Box Number is Not Acceptable)	-	
9130 S. DADELAND BLVD #1701				2 Street Aut	Gress (F.O. Dox Number is Not Acceptable)		
TWO DATRAN CENTER			8	3			
MIAMI FL 33156			8	4 City		. 85 Zip C	Code
				1	<u></u> <u></u>	L i i	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	, the abo	ve-named cor	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	of changing its cintment as reg	registered gistered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	la Statute	es.			
SIGNATURE					red when reinstating) DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg 12. OFFICERS AND DIRECTORS			egistered Aç	jent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	STITUTE STATE STATE		1.1 TITLE			Change	Addition
NAME	FRESHMAN, JERALD A		1.2 NAM	E .			
STREET ADDRESS	9130 S DADELAND BLVD #1701		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY	-ST-ZIP			
TITLE	VD DELETE		2.1 TITLE			☐ Change	Addition
NAME	FRESHMAN, LAWRENCE N.		2.2 NAM	ε			
STREET ADDRESS	9130 S DADELAND BLVD #1701		2.3 STRE	ET ADDRESS			ļ
CITY-ST-ZIP	MIAMI FL		2.4 CITY	-ST-ZIP			
TITLE	STD	☐ DELETE	3.1 TITLE	<u> </u>	·	Change	☐ Addition
NAME	TRAITZ, JAMES J.		3.2 NAM				,
STREET ADDRESS	9130 S DADELAND BLVD #17	01	3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL ,	· <u></u>	3.4. CITY				
TITLE		☐ DELETE	4.1 TITLE	1		Change	☐ Addition
NAME	,		4, 2 NAN		· ·		
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY		<u> </u>		☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAM			☐ Change	
NAME				EET ADDRESS		, .	
STDEET VUUDESS			= 3.3 S IKI				

CITY-ST-ZIP 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 repect 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 of 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, with all other like empowered.

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-Z!P

TITLE

NAME

☐ DELETE

OF SIGNING OFFICER OR DIRECTOR

03/24/99

(305) 670-1400

☐ Change

☐ Addition