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 # 554843

(3)

SECOND GENERATION INC.

FILED Feb 05 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address | | | | | | | | .! | |
|---|--|-------------------------|----------------|--|--|--|----------------------------|--------------|--|
| 11098 BISCAYNE BLVD P.O. BOX 61-1207 | | | | | | 1 | | | |
| STE. 302 NORTH MIAMI FL 33161 | | | | | | | | | |
| MIAMI FL 33161 US | | | | | | | DO NOT WRITE IN THIS SPACE | | |
| US | | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | | 11/03/1977 | 1.7. | | |
| <u> </u> | lace of Business | 2a. Mailing Add | ress | | | 4. FEI Number | | plied For | |
| 21 | # | 26 | i oto | | | 59-1787261 | | t Applicable | |
| Suite, Apt. | #, etc. | 27 Suite, Apt. # | | | | 5. Certificate of Status Desired | \$8.75 A Fee Re | | |
| City & State | е | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | | |
| 23 | | 28 | | | | Trust Fund Contribution | Added t | - | |
| Zip | Country | Zip | | Country | | 8. This corporation owes or has paid the | | | |
| 24 | 25 | [29] | 30 | <u>) </u> | | Personal Property Tax due June 30. | | _NO | |
| | 9. Name and Address of Curren | t Hegistered Agent | | 81 | Name | 10. Name and Address of New Register | ed Agent | | |
| | ARTNER, CLARK 1998 BISCAYNE BOULEVARD | | | 01 | Name | | | | |
| | | | 82 | Street Add | ress (P.O. Box Number is Not Acceptable) | | | | |
| | ITE 302 Ami FL 33161 | | | 83 | | | | | |
| | | | | 84 | City | - | 85 Zip C | Code | |
| | | | | | <u> </u> | _ | FL 1 | | |
| 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. | | | | | | | | | |
| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | |
| SIGNATURE | | | | | | | | | |
| 10 | Signature, typed or printed name of registered age OFFICERS ANI | | (NOTE R | 13. | nt signature requi | red when reinstating) ADDITIONS/CHANGES TO OFFICERS | | 2 1/1 2 | |
| 12. | PST OFFICERS AND | | ELETE | 1.1 TITLE | | ADDITIONS/CHANGES TO OFFICERS | Change | Addition | |
| NAME | GEARTNER, CLARK | | | 1.2 NAME | | | onlings | | |
| STREET ADDRESS | 11098 BISCAYNE BLVD, SUIT | F 302 | | 1.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL | 2 002 | | 1.4 CITY-S | | | | | |
| TITLE | V | | ELETE | 2,1 TITLE | 1.4712 | | Change | Addition | |
| NAME | KAPLAN, STUART | - | | 2.2 NAME | | | | | |
| STREET ADDRESS | 11098 BISCAYNE BLVD, SUITE 302 | | | 2.3 STREET ADDRESS | | | | 1 | |
| CITY-ST-ZIP | MIAMI FL | | | 2. 4 CITY - S | 1 | | | | |
| TITLE | | □ 0 | ELÉTE | 3.1 TITLE |). Lii | | ☐ Change | Addition | |
| NAME | | _ | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | | 3.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | • | 3.4. CITY - 5 |] | | | { | |
| TITLE | | D | ELETE : | 4.1 TITLE | | | ☐ Change | ☐ Addition | |
| NAME | | | | 4. 2 NAME | | | | _ | |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS | | | 1 | |
| CITY-ST-ZIP | | | | 4,4 CITY - S | į. | | | } | |
| TITLE | | | ELETE | 5.1 TITLE | | | Change | Addition | |
| NAME | | | | 5.2 NAME | | | ·- | | |
| STREET ADDRESS | | | | 5,3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | | 5.4 CITY-S | ! | | | | |
| TITLE | | | ELETE | 6.1 TITLE | | | Change | ☐ Addition | |
| NAME | | | | 6.2 NAME | . | | - · · · · · | | |
| STREET ADORESS | | | | 6.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | | 6.4 CITY-S | | | | | |
| 14 I bezeby c | certify that the information supplied wi | th this liting does not | qualify for th | ne exemp | tion stated in | Section 119.07(3)(i), Florida Statutes. I furthe | r certify that the | information | |
| indicated on this annual report or superimental armual 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 of the receiver or trustee in powered 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 a far attacking with an address. | | | | | | | | | |

SIGNATURE: SECULPER GENERALINER 1/5/98 305-891-6383