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 # 565338

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KENNY NACHWALTER SEYMOUR ARNOLD CRITCHLOW & SPEC TOR, P.A.

SIGNATURE	Signature, typed or printed name of registered agent and it	ttle if applicable. (NOTE:	Registered Agent signature require	ed when reinstating)		D.	ATE		
12.		OFFICERS AND DIRECTORS			CHANC	ES TO OFFICE	O OFFICERS AND DIRECTORS IN 12		
TITLE	VPD	☐ DELETE	1.1 TITLE				x ☐ Change	☐ Addition	
NAME	ARNOLD, RICHARD ALAN		12 NAME						
STREET ADDRESS	201 SO. BISCAYNE BLVD.		1.3 STREET ADDRESS				•	ì	
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-ST-ZIP	Miami.	FL_	33131			
TITLE	PD	☐ DELETE	2.1 TITLE				X Change	☐ Addition	
NAME	NACHWALTER, MICHAEL		2.2 NAME					ì	
STREET ADDRESS	201 SO. BISCAYNE BLVD.		2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI, FL 00000		2, 4 CITY-ST-ZIP	Miami,	FΙ	33131			
TITLE	EVPD	☐ DELETE	3.1 TITLE				X Change	☐ Addition	
NAME (CRITCHLOW, RICHARD H		3.2 NAME	•					
STREET ADDRESS	201 SO. BISCAYNE BLVD.		3.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI, FL 00000		3 4. CITY-ST-ZIP	Miami,	FL_	33131			
TITLE	STD	☐ DELETE	4.1 TITLE				X Change	☐ Addition	
NAME	SPECTOR, BRIAN F		4. 2 NAME						
STREET ADDRESS	201 SO. BISCAYNE BLVD.		4.3 STREET ADDRESS				•		
CITY-ST-ZIP	MIAMI, FL 00000		4.4 CITY-ST-ZIP	Miami,	FL	33131			
TITLE		☐ DELETE	5.1 TITLE			-	Change	☐ Addition	
NAME			5.2 NAME		•				
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition	
NAME			6.2 NAME				•		
STREET ADDRESS			6.3 STREET ADDRESS				•		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	<u> </u>					
indicated of the officer of the offi	ertify that the information supplied with this on this annual report or supplemental ann director of the corporation or the receiver or Block 13 if changed, or wan attachme	ual report is true and accur or trustee empowered to ex	ate and that my signatur ecute this report as requ	e shall have the san	ne lega	i eirect as ir mac	ie under Gaur, macr	ann an	

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90027 002 ***150.00

TOR, P.	NACHWALTEN SETVICON / A.	MANOLU CALIONLOW &							
Principal Plac	e of Business	Mailing Address			1 (20) (0) (1) (1)	ini njina ilika ilini lari	BIBİL GIBIL DIBIL BIBIL B	ibi didi iddi	
•		201 S BISCAYNE BLVD.							
201 S BISCAYNE BLVD. 201 S BISCAYNE BLVD. 1100 MIAMI CENTER 1100 MIAMI CENTER									
MIAMI FL 33131-4327 MIAMI FL 33131-4327					DO NOT WRITE IN THIS SPACE				
US			3. Date Incorporated or Qualifed						
					01/16/1978				
Principal Place of Business 2a. Mailing Address				_	4. FEI Number			plied For	
21	26				59-1796096			t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Stati	us Desired	. \$8.75 A		
22	<u> </u>	27			3. 3. 3. 3. 3. 3. 3. 3.		Fee Re	quired	
City & Sta	te	City & State			6. Election Campaig	n Financing		May Be	
23		28			Trust Fund Contri	bution	Added to	o Fees	
Zip	Country	Zip	Country	y	8. This corporation of	owes the current ye		_	
24	25	29 30			Personal Property Tax. Yes No				
	9. Name and Address of Curre	nt Registered Agent		,	10. Name and Addre	ess of New Regist	tered Agent		
			81	Name					
	CHWALTER, MICHAEL ESQ		82	Street Add	ress (P.O. Box Number is	Not Acceptable)	<u> </u>		
	SO. BISCAYNE BLVD.					ess (1.0. box resinour is recorded by			
MIAI	MI, FLORIDA EFL 33131		83	3		· •			
			-	1 00	_		85 Zip C	`odo	
			84	City			FL 85 Zip (Joue	
SIGNATURE	Signature, typed or printed name of registered age		 -	ent signature require	ed when reinstating) ADDITIONS/CHAN		NE AND DIRECTO	RS IN 12	
12.		ND DIRECTORS	13.		AUDITIONS/CHAI	IGES TO OFFICE	X Change	☐ Addition	
TITLE	VPD	C) OCIETE					X —, 595		
NAME	ARNOLD, RICHARD ALAN		12 NAME						
STREET ADDRESS				ET ADORESS		00101			
CITY-ST-ZIP	MIAMI, FL 00000	- Druett	1.4 CITY-5	ST-ZIP	<u>Miamí, FL</u>		X Change	☐ Addition	
TITLE	PD	☐ DELETE	2.1 TITLE				Orlange		
NAME	NACHWALTER, MICHAEL		2.2 NAME						
STREET ADDRESS	,			T ADDRESS	Miami, Fl	33131			
CITY-ST-ZIP	MIAMI, FL 00000		2.4 CITY-	ST-ZIP	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		X Change	Addition	
TITLE	EVPD	☐ DELETE	3.1 TITLE		•		AL Juliange		
NAME	CRITCHLOW, RICHARD H		3.2 NAME						
STREET ADDRESS	<u> </u>			ET ADDRESS	Miami, FL	33131			
CITY-ST-ZIP	MIAMI, FL 00000		3 4. CITY-	ST-ZIP	ritami, Li		X ☐ Change	Addition	
TITLE	STD	☐ DELETE	4.1 TITLE				AL_1 Change		
NAME	SPECTOR, BRIAN F		4. 2 NAME						
STREET ADDRESS	1 =- · · · · · · · · · · · · · · · · · ·			ET ADDRESS	Mirai m	22121			
CITY-ST-ZIP	MIAMI, FL 00000		4.4 CITY-8		Miami, FL	33131	F7 05-45-	□ Addistr-	
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition	
NAME			5.2 NAME		•				
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		 			
TITLE		☐ DELETÉ	6.1 TITLE				Change	☐ Addition	
	1		6.2 NAME						

SIGNATURE:

Sectar

305-381-7475

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