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

FILED Jan 20 1998 8:00am Secretary of State

POCUMENT # 590959 (3) HARBOUR SALES INC.					
Principal Plac	e of Business	Mailing Address		COMPAN OFFEN IBLE DEACH INCOMENDATION THAT DIRECT	11911 G:614 B1841 61811 61811 1881
7805 SW 139 TERR 7805 SW 139 TERR					
MIAMI FL 33158 MIAMI FL 33158				DO NOT WRITE IN 1F	IIS SPACE
1				3. Date Incorporated or Qualified	
				10/24/1978	
2. Principal F	2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For
21 26			59-2049702	Not Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75 Additional Fee Required
22 27 City & State City & State				6. Election Campaign Financing	
23 28		·		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Curren	it Registered Agent		Name and Address of New Register	ed Agent
EM	IANUEL KLIBANER		81 Name		
7805 SW 139 TERR			82 Street A	Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33158			-		·
			83		
			84 City	F	85 Zip Code
The Discount to the provious of Continue 607 0600 and 607 1600 Florida Statutes the			dan the should named		L so zipeode
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) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	S	DELETE	1.1 TITLE		Change Addition
NAME	KLIBANER, ESTHER		1.2 NAME		
STREET ADDRESS	7805 S W 139 TERR		1.3 STHEET ACIDRESS		
CITY-ST-ZIP	MIAMI, FL 0		1.4 CITY - ST - ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		Change Addition
NAME	KLIBANER, KENNETH		2.2 NAME	11 10.17	
STREET ADDRESS	270 ROSWELL FARMS ROAD		2.3 STREET ADDRESS	510 HOUZE WAY 3	20077
CITY-ST-ZIP	ROSWELL GA	DELETE	2.4 CITY-ST-ZIP	ROSWELL, 67	000 / /
TITLE	PD Klibaner, emanuel	DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME PERFET ADDRESS	7805 S W 139 TERR		3.2 NAME		
STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 0		3.3 STHEET ADDRESS 3.4 CITY-ST-ZIP		
TITLE	V	DELETE	4.1 TITLE		Change Addition
NAME	KLIBANER, MITCHELL		4.2 NAME		
STREET ADDRESS	9401 ROBERTS DR NW #224	\	4.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA		4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETC	61 THTLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	pertify that the information supplied w	ith this filing does not qualify	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutos. I further	cortify that the information

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the conformation or the receiver of hustress in Block 12 or Block 13 if changed, or on an attachment with an address 3.

IGNATURE MUNICIPAL ELLEGAL

1/3/98 305 234-1072