FILE	E NOW: FILING	FI)	LEI	<u> </u>							
PROFIT CORPORATION ANNUAL REPORT 1998			FLORIDA DEPARTMENT Sandra B. Morti Secretary of Sta DIVISION OF CORPOR		tham tate		Feb 03 1998 8:00am Secretary of State				
METZG	GER AND WELLISCH,	Maili	(7) ng Address 3 S DIXIE HWY #20	6				~			
MIAMI FL 33	143	MIA	MI FL 33143				DO NOT WRIT	E IN THIS	SPACE		
21	Place of Business	26	lailing Address				12/20/1971 4. FEI Number 59-1371264			Not A	ied For Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		Fee	Requ	
City & State			City & State				6. Election Campaigh Financing Trust Fund Contribution		\$5.0 Adde)0 м. ed to !	
Zip 24	Country 25	29	Zip Coun 30				This corporation owes or has p Personal Property Tax due Jun	☐ Yes			
	9. Name and Address of	f Current Register	ed Agent	8:	.T	Name	10. Name and Address of New R	egistered	Agent		
METZGER, URSULA 8603 S DIXIE HWY #206 CORAL GABLES, FL MIAMI 33143					2		ess (P.O. Box Number is Not Accepta	ble)			
				84	4	City		FI	85 Zi	ip Co	de
11. Pursuant office or r agent. I a	to the provisions of Sections egistered agent, or both, in t im familiar with, and accept t	607.0502 and 607. he State of Florida. he obligations of, S	1508, Florida Statu Such change was ection 607.0505, Fl	tes, the aborauthorized to	ve- oy 1	named corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose o	of changing pointment	j its re as re	egistered gistered
SIGNATURE	Signature, typed or printed name of re-	ristered agent and litte if a	O/A) aldeoilge	TF. Registered Ad	aeni	t sinnature require	d when reinstating)	DATE			
12.	OFFIC	ERS AND DIRECTO		13.			ADDITIONS/CHANGES TO OFF!		D DIRECTO	ORS	IN 12
title Name Street adoress	PD METZGER, URSULA 11875 SW 73RD AVE		☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE	į	DDRESS			Changi	e į	Addition
CITY-ST-ZIP TITLE NAME	MIAMI, FL 00000		☐ DELETE	1.4 CITY - 2.1 TITLE 2.2 NAME		-ZIP			☐ Change	e [Addition
STREET ADDRESS CITY-ST-ZIP				2.3 STREE 2. 4 CITY	T A						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY	TA			·	☐ Change	> [Addition
TITLE NAME STREET ADDRESS			☐ DELÉTE	4.1 TITLE 4. 2 NAME 4.3 STREE	T AI	DDRESS			Change	; [Addition
CITY-ST-ZIP TITLE NAME			☐ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME					☐ Change	<u> </u>	Addition

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.

SIGNATURE:

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS ☐ Change ☐ Addition

☐ DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME