

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

FILED  
Apr 20 1998 8:00am  
Secretary of State

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| <b>PROFIT CORPORATION ANNUAL REPORT 1998</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Sandra B. Moynihan</b> ?<br>Secretary of State<br>DIVISION OF CORPORATIONS                                                                                                            |  |
| <b>DOCUMENT # 632981</b><br>1. Corporation Name<br><b>ALKAM, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                        |                                                                                                                                                                                                                                |  |
| Principal Place of Business<br><b>7122 NW 50th St.</b><br><b>Miami FL 33166-7236</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                        | Mailing Address<br><b>7122 NW 50th St.</b><br><b>Miami FL 33166-7236</b>                                                                                                                                                       |  |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                        | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country                                                                                                                                       |  |
| 3. Date Incorporated or Qualified<br><b>8/16/79</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                        | 4. FEI Number<br><b>19-1933034</b>                                                                                                                                                                                             |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                        | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                                                                                          |  |
| 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                        |                                                                                                                                                                                                                                |  |
| 9. Name and Address of Current Registered Agent<br><b>A. F. Alentado &amp; Associates</b><br><b>1149 SW 27th Avenue, Ste 203</b><br><b>Miami FL 33135</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                        | 10. Name and Address of New Registered Agent<br>81 Name <b>Benjamin Alvarado</b><br>82 Street Address (P.O. Box Number is Not Acceptable)<br><b>7122 NW 50th St.</b><br>83<br>84 City <b>Miami</b> FL 85 Zip Code <b>33166</b> |  |
| 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.<br>SIGNATURE <b>[Signature]</b> <b>BENJAMIN ALVARADO</b> <b>3/19/98</b><br>(NOTE: Registered Agent's signature required when registering)                                                                                                                                                                                              |                                                                                        |                                                                                                                                                                                                                                |  |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                        | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                                                          |  |
| TITLE <input type="checkbox"/> DELETE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition            |                                                                                                                                                                                                                                |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1.2 NAME                                                                               |                                                                                                                                                                                                                                |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1.3 STREET ADDRESS                                                                     |                                                                                                                                                                                                                                |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1.4 CITY-ST-ZIP                                                                        |                                                                                                                                                                                                                                |  |
| TITLE <input type="checkbox"/> DELETE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition            |                                                                                                                                                                                                                                |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2.2 NAME                                                                               |                                                                                                                                                                                                                                |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2.3 STREET ADDRESS                                                                     |                                                                                                                                                                                                                                |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2.4 CITY-ST-ZIP                                                                        |                                                                                                                                                                                                                                |  |
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| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 3.2 NAME                                                                               |                                                                                                                                                                                                                                |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 3.3 STREET ADDRESS                                                                     |                                                                                                                                                                                                                                |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 3.4 CITY-ST-ZIP                                                                        |                                                                                                                                                                                                                                |  |
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| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 6.4 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 report or supplement to 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.<br>SIGNATURE: <b>[Signature]</b> <b>Benjamin Alvarado</b> <b>3/19/98</b><br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # |                                                                                        |                                                                                                                                                                                                                                |  |

CR2E034 (10/97)