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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

663656

(7)

SY LAK	(E, INC.				i	 	HA BUGUN BEBUN BU	C) 0.00 100
Principal Place of Business		Mailing Address	Mailing Address		#4c	L 199446 AURS SILES AND AND SILES SIN SIRES	11 91911 61911 611	Gra Militi (ma)
9100 S. DADE	ELAND BLVD	9100 S. DADELAND BLV	/D		Hora			
512 Miami FL 331	56	512 MIAMI FL 33156	1/20 5	ά,	IXIE HVOY	DO NOT WRITE IN THIS	SPACE	
US		US	US COKYL		PABLES :	3. Date Incorporated or Qualified		***
ADDRE	SS WILL CHANGE AS	,			146	01/10/1980		:
2. Principal Pl	lace of Business	2a. Mailing Address	C 10 km		3.0	4. FEI Number	A	pplied For
21		26	26			59-1965182	N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27						Required
City & State		City & State	η ´			6. Election Campaign Financing		Мау Ве
23 Zip	Country	28	Zip Country			Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30.		itangible No
541	9. Name and Address of Curren		130]	Ī		10. Name and Address of New Registered	<u> </u>	
LAKE, SY 81 Name								
		92 Street Add			ss (P.O. Box Number is Not Acceptable)	-,+		
	110 S.W. 145TH TERR. AMI FL 33186		82 Street		Street Addres	ss (F.O. Box Number is Not Acceptable)		ì
				83				
				84	City		os Zio	Code
					City	FL	85 Zip	Code
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 punted name of register-duplent and this if applicable (NOTE Registered Agent signature required when reinstating) DATE On the control of t								
12.	OFFICERS AN		13.	a Ager	it signature required	ADDITIONS/CHANGES TO OFFICERS AN	D DIBECTO	RS IN 12
TITLE	D	DELETE	1.1 (1)	1LF			Change	☐ Addition
NAME	LAKE, E MARILYNN		1.2 NA	AME				
STREET ADDRESS	14110 S.W. 145TH TERR		1.3 ST	AFET A	ADDRESS			
CITY-ST-ZIP_			TY-ST	- ZIP			Ì	
TITLE	DP DELETE 217		TLE			☐ Change	☐ Addition	
NAME	lake, sy		2.2 N					
STREET ADDRESS	14110 S.W. 145TH TERR.		2.3 \$1		ADDRESS]
CITY-ST-ZIP	MIAMI, FL 00000		2. 4 CITY		I - 7IP			
TITLE		☐ DELETE	3.1 TIFLE				Change	Addition
NAME			3.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE		3.4. CITY - ST - ZIP 4.1 TITLE			Change	☐ Addition
TITLE NAME		Dittil	4.1 III					Availion
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			1	NECT A				
TITLE		DELETE	5.1 Til		411		Change	Addition
NAME		-	5.2 NA				-	
STREET ADDRESS					ADDRESS			{
CITY-ST-ZIP				TY-ST				
TITLE		DECETE	6.1 TIT				Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 S1	REET A	ADDRESS			
CITY-ST-ZIP			6.4 01	1Y-ST	- ZIP			
						ection 119.07(3)(i), Florida Statutes. I further o		
officer or d Block 12 d	or his arrival report or supplementa director of the corporation or the rece or Block 13 if changed, or p) an attac	caminan report is true and ac- liver or trusted empowered to chinent with an address.	execute t	, mai his re	eport as requir	shall have the same logal effect as if made u ed by Chapter 607, Florida Statutes; and that	my name ap	opears in

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