## 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

**DOCUMENT #** 671884

(5)

FRIEDMAN & COMPANY, INC.

Principal Place of E	susiness
2424 SOUTH DIXIE	HIGHWAY

Mailing Address

2424 SOUTH DIXIE HIGHWAY MIAMI FL 33133

## FILED Apr 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/28/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2002870 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FRIEDMAN ALLAN F 2424 S DIXIE HWY 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33133** 63 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1 1 TiTLE Change Addition FRIEDMAN, ALLAN F NAME 1.2 NAME 2424 SO DIXIE HWY STREET ADDRESS 13 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 1 4 CITY - ST-ZIP DELETE Change Addition TITLE 21 TITLE FRIEDMAN ALLAN F NAME 2.2 NAME 2424 SO DIXIE HWY STREET ADDRESS 2.3 STREET ADDRESS **MIAMI, FL 00000** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TIFLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Addition 41 HILE Change 4. 2 NAME NAME 4.3 STREET ADDRESS STREE! ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CHY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TIPLE 6 1 TIPLE

14. Thereby 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 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 trusted 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 ittachment with an address.

62 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

305-854-3445