

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

FILED

Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 821759 (8)
1. Corporation Name
BOREAS CORPORATION

Principal Place of Business
7372 N.W. 12TH STREET
1209 ORANGE ST
MIAMI FL 33126
US

Mailing Address
7372 N.W. 12TH STREET
1209 ORANGE ST
MIAMI FL 33126
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2506 PONCE DE LEON BLVD Suite, Apt. #, etc. 22 City & State 23 CORAL GABLES, FL Zip 24 33134 Country 25 USA		2a. Mailing Address 26 2506 PONCE DE LEON BLVD Suite, Apt. #, etc. 27 City & State 28 CORAL GABLES, FL Zip 29 33134 Country 30 USA		3. Date Incorporated or Qualified 08/20/1968	
		4. FEI Number 13-2506446		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. 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 GOODLIN, CHALMERS H. 7372 NW 12 STREET MIAMI FL 33126		10. Name and Address of New Registered Agent 81 Name GOODLIN, CHALMERS H 82 Street Address (P.O. Box Number is Not Acceptable) 2615 GRANADA BLVD 83 84 City CORAL GABLES FL 85 Zip Code 33134	
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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]* DATE: 03-11-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	1.1 TITLE	S
NAME	GOODLIN, AILA V.	1.2 NAME	GOODLIN, AILA V.
STREET ADDRESS	7372 NW 12TH STREET	1.3 STREET ADDRESS	2615 GRANADA BLVD
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	P	2.1 TITLE	P
NAME	GOODLIN, CHALMERS H	2.2 NAME	GOODLIN, CHALMERS H
STREET ADDRESS	7372 NW 12TH ST	2.3 STREET ADDRESS	2615 GRANADA BLVD
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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 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: *[Signature]* DATE: 03-11-98 305-448-0574

CR2E034 (10/97)