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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F45934

(9)

Secretary of State

FILED

Jan 20 1998 8:00am

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Principal Place of Business Mailing Address	
CORAL GABLES FL 33134 CORAL GABLES FL 33134	
DO NOT WRITE IN	THIS SPACE
3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 26 59-2118737	Not Applicable
I Suite Ant # ate	60.75
5. Certificate of Status Desired	Fee Required
City & State City & State 6, Election Campaign Financing	\$5.00 May Be
	Added to Fees
Zip Country Zip Country 8. This corporation owes or has paid	the current/year Intangible
24 25 29 30 Personal Property Tax due June 30 9, Name and Address of Current Registered Agent 10, Name and Address of New Regis	
	stered Agent
SOVERS, JURIGE 4, M.D.	
1201 SEVILLA AVENUE CORAL GABLES FL 33134 82 Street Address (P.O. Box Number is Not Acceptable))
83	
84 City	85 Zip Code
	FL
11. Pursuant to the provision of Sections of 7032 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the puriodice or registered control of the puriodic of the corporation of the corpora	pose of changing its registered
office or in historia admit his fatch. Whist at the Such change was authorized by the corporation's board of directors. I hereby accept to agent. Lambankar with such accept the backet of the such as a such change was authorized by the corporation's board of directors. I hereby accept the agent. Lambankar with such accept the such as a such change was authorized by the corporation's board of directors. I hereby accept the agent. Lambankar with such as a such accept the such accepts the such acce	ne appointment as registered
SIGNATURE	1908\
Signature: Need of printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATA
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE 1.1 TILE	Change Addition
NAME SOWERS, JORGE J. 12 NAME	C trange C reason
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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 teport 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 of the receiver of 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 a later throughout the same legal effect as if made under oath; that I am an officer or director of the corporation of

1/20/98

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