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 # F51159

(4)

JAMES V. CAMMISA, JR., INC.							
					A CHARANE MAN BOME MERCE MANAGEMENT	di adalik ahabi bilah bilah ahabi a	
Principal Plac	e of Business	Mailing Address				ıı Aibir Asalı Sıkit Bibir Albis A	1011 1021
PO BOX 6616		PO BOX 6616					
MIAMI FL 33154 US		MIAMI FL 33154 US			DO NOT WRITE	IN THIS SPACE	
63		U3			3. Date Incorporated or Qualified	. 114 77 110 01 770 2	
					10/27/1981		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21		26			59-2131765	- +	Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.			5. Certificate of Status Desired	□ \$8.75 Ac	ditional
22		27			6. Certificate of Status Desired	Fee Req	uired
City & State		City & State		6. Election Campaign Financing	\$5.00 N		
Zip Country		[28]			Trust Fund Contribution	Added to	
	Country	Zip	Country		8. This corporation owes or has pa		
25 29 29 29 S. Name and Address of Current Registered			0 Personal Property Tax due June 30. LJ Yes 10. Name and Address of New Registered Agent			NO	
CAL	MMISA, JAMES V., JR.		81 N	lame	10. 710110 0110 71001000 0711011 110	gistores rigorit	
10150 COLLINS AVENUE							
	L HARBOUR FL 33154		82 S	street Addre	ss (P.O. Box Number is Not Acceptet	ole)	
""			B3				
			84 C	ity	 	las 3:- 0:	ala .
				-		FL 85 Zip Co	
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 a	im family with, and account the obliga-	ions of, Section 607.0505, Flori	ida Statutes.	e corporatio	ins board of directors. Thereby acce	рсине арроялиленсав те	gistered
SIGNATURE	1	'			2-127	88	
12.	Signature type for pricted name of the sterochange	Philamina Th	Flegislared Agent &	gnature required		DATE	111110
TITLE	P	DELETE	1.1 DITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME	CAMMISA, JAMES V., JR.		1.2 NAME				L. Patrion
STREET ADDRESS	10150 COLLINS AVE.		1.3 STREET ADDRESS				
CITY-ST-ZIP	BAL HARBOUR FL		1.4 CITY-ST-ZIP				
TITLE		DELETE	2.1 TITLE			☐ Change	Addition
NAME			2 2 NAME				
STREET ADORESS			2.3 STREET ADDRESS				ŀ
CITY-ST-ZIP			2 4 CITY+ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADD				- 1
CITY-ST-ZIP		☐ DELETE	3 4. CITY-ST-2	NP		[] Char	Additio-
TITLE NAME			4 1 TITLE 4. 2 NAME			Change	Addition
STREET ADDRESS CITY+ST-ZIP			4 3 STREET ADDRESS				
TITLE		DELETE	51 TITLE	<u> </u>		Change	Addition :
NAME		*****	5 2 NAME				_
STREET ADDRESS			5.3 STREET ADD	ORESS			
CITY-ST-ZIP			5.4 CITY-ST-ZI				
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADD	RESS			
CITY-ST-ZIP			6.4 CITY-ST-ZI	P			

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 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:

2/27/

FILED

Mar 06 1998 8:00am

Secretary of State