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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

FILED

Feb 23 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

	1990	ENISION CI CI		5140		
POCU Corporation VIRMIN		0006598 (6)		-		
Principal Plac	e of Business	Mailing Address				.B 8/101 91/10 10/01 10/1 1001
3000 ISLAND		3000 ISLAND BLVD				
2901 2901					DO NOT WOLLD IN THIS	00405
N MIAMI BCH FL 33160 US		N MIAMI BCH FL 33160	N MIAMI BCH FL 33160 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
] 00		00			12/27/1994	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			98-0065855	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & Stat	<u> </u>	City & State			6 Fleeties Compaign Financing	Fee Required
23		26			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the cur	repryear Intangible
24	25		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered	Agent
	C CORPORATE SERVICES, INC.					
i .	1 S. BISCAYNE BLVD. HTE 3000		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131			83			
 		4	84	City		85 Zip Code
					FL	
11. Pursuant office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida. Such change was at	s, the above uthorized by	-named corpora	poration submits this statement for the purpose oution's board of directors. I hereby accept the app	changing its registered contract
agent. La	m familiar with, and accept the obliga	ations of, Section 607.0505, Flore	ida Statutes		tion's board of directors. I hereby accept the app	
SIGNATURE	Signature, typed or printed harne of registered age:	nt and title if applicable (NOTE:	Registered Age	nt signature requi	ired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE			Change Addition
NAME	MUGRABI, SHALOM		1.2 NAME		·	
STREET ADDRESS	3000 ISLAND BLVD, 2901		1.3 STREET			
CITY-ST-ZIP TITLE	WILLIAMS ISLAND FL VSD	DELETE	1.4 CITY-ST 2.1 TITLE	F-ZIP		Change Addition
NAME			2.2 NAME	ľ		
STREET ADDRESS	201 S. BISCAYNE BLVD.		2.3 STREET	ADDRESS		
CITY-ST-ZIP	JERUSALEM IS 2.		2.4 CITY-S	T-ZIP		
TITLE	_		3.1 TITLE			☐ Change ☐ Addition
NAME	TESSONE, DAVID		3.2 NAME			
STREET ADDRESS	201 S. BISCAYNE BLVD. JERUSALEM IS		3.3 STREET			
CITY-ST-ZIP TITLË	JENUSALEM IS	DELETE	3.4. CITY - S 4.1 TITLE	1+211/		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS	•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			ļ
STREET ADDRESS			5.3 STREET	1		ļ
CITY-ST-ZIP		DELETE	5.4 CITY+S1	- ZIP		Change Addition
TITLE		□] DETEIL	6.1 TITLE			L CHANGE L Addition
NAME Street address			6.2 NAME 6.3 STREET	ADDRESS		
CITY-ST-ZIP	()		6.4 CITY-ST			

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 or supplimental 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 changes.