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 # F9700001016 (1)

FILED Jan 29 1998 8:00am Secretary of State

OPTIMO PLAZA, INC.		` '		88101 (1881 1882) (1881 1881 1881 1881 (1881 1882) (1881 1882)
Principal Place of Business	Mailing Address		1 1001100 1110 18111 38011 88111 08111 88134 60141	0 C 1 E 1 1 E 1 E 1 E 1 E 1 E 1 E 1 E 1 E
PHILLIPS POINT EAST TOWER PHILLIPS POINT EAST TO 777 SOUTH FLAGLER DR. STE 909 777 SOUTH FLAGLER DR. WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3		ler dr., ste 909	DO NOT WRITE IN THI	S SPACE
			3. Date Incorporated or Qualified 02/26/1997	
2, Principal Place of Business	2a. Mailing Address	S	4. FEI Number	Applied For
21	26	_	APPLIED FOR	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, et	C.	5. Certificate of Status Desired	\$8.75 Additional
22 City & State	27			Fee Required
23	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	Zip	Country	Trust Fund Contribution	Added to Fees
24 25	29	30	 This corporation owes or has paid the of Personal Property Tax due June 30. 	Yes No
9. Name and Address of Curren		1001	10. Name and Address of New Registere	
EICHENBERGER, RENE		81 Name		
777 SOUTH FLAGLE R DR., STE 909		62 Street	Address (P.O. Box Number is Not Acceptable)	
WEST PALM BEACH FL 33401		Silver,		
		83		
		84 City		■ 85 Zip Code
		1 1 1	F	L .
 Pursuant to the provisions of Sections 607.050. office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation. 	2 and 607.1508, Florida : of Elorida, Such change	Statutes, the above-named was authorized by the corr	corporation submits this statement for the purpose	of changing its registered
agent. I am familiar with, and accept the obliga	ations of, Section 607.050	05, Florida Statutes.	oralisms board of directors. Thereby accept the a	ppolitiment as registered
SIGNATURE	**************************************			
Signature, typed or printed name of registered age 12. OFFICERS ANI		(NOTE: Registered Agent signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 42
TITLE PO	DELET		ADDITIONS/CHAINGES TO OFFICERS A	Change Addition
NAME MUELLER, WILFRED		1.2 NAME		
STREET ADDRESS 777 SOUTH FLAGLER DR., S	TE 909	1.3 STREET ADDRESS		,
CITY-ST-ZIP WEST PALM BEACH FL		14 CITY-ST-ZIP		
TITLE V	☐ DELET			Change Addition
NAME EICHENBERGER, RENE		2 2 NAME		
STREET ADDRESS 777 SOUTH FLAGLER DR., S	TE 909	2.3 STREET ADDRESS		
CITY-ST-ZIP WEST PALM BEACH FL		2. 4 CI1Y-ST-ZIP		
TITLE VSTD	DELET	É 3.1 TITLE		Change Addition
NAME MUELLER, SANDRA	TT 000	3.2 NAME		
STREET ADDRESS 777 SOUTH FLAGLER DR., S	IE 909	3.3 STREET ADDRESS		
CITY-ST-ZIP WEST PALM BEACH FL		3.4. CITY-ST-7IP		
TITLE	L DELET			☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	☐ DELET	4.4 CITY - ST - ZIP		Change T 44431
TITLE	L_ UELEI			L Cliange L Addition
NAME		5.2 NAME		() WILL
STREET ADDRESS				/ / / / / / / / / /
CITY CT 7/D		5.3 STREET ADDRESS		O Baller
CHY-ST-ZIP	☐ DELETI	5.4 CITY - ST - ZIP		Thange Addition
TITLE	DELETI	5.4 CITY - ST - ZIP E 6.1 TITLE	- 6000024150 -01/29/9801022	Thange Addition
TITLE NAME	☐ DELETI	5.4 CITY - ST - ZIP E 6.1 TITLE 6.2 NAME	5000024156 -01/29/98010220 ***150.00	Change Addition
TITLE	☐ DELETI	5.4 CITY - ST - ZIP E 6.1 TITLE		Thange Addition

4. I bereby 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 informatio indicated on this annual report or supplied lental enough report of 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 of trustee en powered to execute this report as required by Chapter 60?, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachmost with an address.

CICNATURE.

1-17-98 5/11

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