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

Suite, Apit #, etc.  Suite, Ap		PROFIT PROGRATION JUAL REPORT 1998	Sandra B. Secretary	TKENT OF STATE  . Mortham  y of State  ORPORATIONS			
Principal Place of Business C/D MORRIS CASSORIA See COLINS AVE BAL HARBOUR FL 33154  2. Principal Place of Dusiness 3. Suite, April 8, dic. 2. City & State 2. Principal Place of Dusiness 2. Principal Place			(7)				
Principal Place of Business QC) MORRIS CASSORIA 8989 COLLINS AVE BAL HARBOUR FL 33154  2. Principal Place of Eusiness 3. Date Incorporated of Qualified 12/15/1982  3. Date Incorporated of Qualified 12/15/1982  3. Date Incorporated of Qualified 12/15/1982 3. Date Incorporate Of Qualified 12/15/1982 3.	E.C.M	.C. CORP.			LERBANI BARI NAKA AWAR AWAR AWAR AWAR AWAR		
Sign All Angeous FL 33154  2. Principal Place of Eusiness 2. P	Principal Pla	ce of Business	Mailing Address				
Principal Place of Eusiness   2a Mailing Address   4. FE I Namber   Applied Fro   Solid Applied   Solid Applied   Applied Fro   Applie	9999 COLLINS AVE 9999 COLLINS AVE						
2. Principal Place of Buseness   2a. Making Address   59-2247150   No. Applied   Status   No. Applied   No. Applied   Status   No. Applied   Status   No. Applied   No. Appli					1		
Surie, April 9, olic.    Surie, April 9, olic.   Surie	<u> </u>	Place of Business	├1		4. FEI Number	Applied For	
City & State  2   2   2   2   3   30   5   5   5   5   5   5   5   5   5	Suite, Ap	l. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
Country   Zij   Country   St. This corporation owes or has paid the current year than plate   Personal Property Tax due June 30   Vos   No   No   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Add	City & Sta	ate	- <del></del>		· · · · -	\$5.00 May Be	
28		Country	· · · · · · · · · · · · · · · · · · ·	Country			
ROSE, ELLEN, ESO.  1111 HINCOLIN ROAD MALE 19500  12 Street Address (P.O. Box Number is Not Acceptable) A.  13 S. G. 3 A.D. Ave. *** A y or or agent among the provisions of Sections 607.05.02 and 607.15.08. Florido Statutos, the above named corporation submits this statement for the purpose of changing its register of fice or registered agent, or both, in the State of physical Succi, change was authorized by the corporation's board of directors. Thereby accept the appointment as register agent tam familiar with a provisions of Sections 607.05.02 and 607.05.05. Florido Statutos.  112 OFFICE ISSAND DIRECTORS  113 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  114 CASSORIA, EDWARD  115 STREET ADDRESS  116 CHIP, ST. 2IP  117 VST. 2IP  118 VSD  119 DILETE  119 DILETE  110 DILETE  1110 CASSORIA, MORRIS  120 STREET ADDRESS  140 ITY, ST. 2IP  151 August Address	24			30	Personal Property Tax due June 30.	Yes No	
SIGNATURE Signature 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 register agent 1 and hamilier with an arrivery the college of statutes. The above named corporation submits this statement for the purpose of changing its register agent 1 and hamilier with an arrivery the college of statutes. The above named corporation's board of directors. I hereby accept the appointment as register agent 1 and hamilier with a product of the college of statutes. The above named corporation's board of directors. I hereby accept the appointment as register agent 1 and hamilier with a product of the college of statutes. The above named corporation's board of directors. I hereby accept the appointment as register agent 1 and hamilier with a product of the college of statutes. The above named corporation's board of directors. I hereby accept the appointment as register agent register requires when remarked to the product of the purpose of changing its register of the purpose of changing its register agent 1 and 1	, R	OSE, ELLEN, ESQ.	riegistered Agent	81 Name		_	
### PID   DILETE   1.1 THE   Change   Add   Add	* <del>*</del>	111 LINCOLN ROAD MALL #500	,	82 Street Add	dress (P.O. Box Number is Not Acceptable)	4	
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 lis register of agent. I put put to obligations of Sections 607,0502, florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as register agent. I am familiar with, and appropriate to obligations of Sections 607,0505, Florida Statutes.  SIGNATURE    Signature   Injury   Inj		IMMIT DENOTE TO 100 TO				#2 V ADD	
office or registered agent, or both, in the State of Portal, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent arm familiar with any algorithms of Secretion 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OF LICLES AND DIRECTORS  12. OF LICLES AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  PTD  CASSORIA, EDWARD  40 BRISTOL RD  WEST NEWTON MA 02165  11 STREEL ADDRESS  CITY-ST-ZIP  NAME  CASSORIA, MORRIS  9999 COLLINS AVE  STREET ADDRESS  CITY-ST-ZIP  SIGNATURE  CASSORIA, MORRIS  9999 COLLINS AVE  BAL HARBOUR FL 33154  2 4 CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CASSORIA, LYDIA  3 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  CHange  Add  Change  Change  Add  Change  Add  Change  Change  Change  Change  Change  Change  Change  Change  Change	•			84 City	3.6, UND /7VE.		
12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PTD	office or agent 1	registered agent, or both, in the State c am familiar with, and a virial the obligat	of Herida. Such change was a light of Section 607.0505, Flo	uthorized by the corpora rida Statutes	ation's board of directors. I hereby accept the a ${\cal M}_{\cal M}$	e of changing its registered appointment as registered	
NAME	12.	OFFICERS AND					
STREET ADDRESS	TITLE	PTD		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE				1.1 1πτΕ	ADDITIONS/CHANGES TO OFFICERS A		
NAME	NAME	CASSORLA, EDWARD 40 BRISTOL RD		1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS A		
### STREET ADDRESS ### ### ### ### ### ### #### #### #	NAME STREET ADDRESS CITY-ST-ZIP	CASSORLA, EDWARD 40 BRISTOL RD WEST NEWTON MA 02165	[] DLLFIE	1.1 TITLE 1.2 NAME 1.3 STREET ACCRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	Change Addition	
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14. 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 informationated 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 a	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CASSORLA, EDWARD 40 BRISTOL RD WEST NEWTON MA 02165 VSD CASSORLA, MORRIS 9999 COLLINS AVE BAL HARBOUR FL 33154 D CASSORLA, LYDIA 1801 14TH AVE SAN FRANCISCO CA 94122	DELETE	1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition	