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 # G486

(5)

THORNTON & ROTHMAN, P.A.

Principal Place of Business Mailing Address

C/O DAVID ROTHMAN 200 S BISCAYNE. STE 3420 MIAMI FL 33131

SIGNATURE:

C/O DAVÍD ROTHMAN 200 S BISCAYNE. STE 3420 MIAMI FL 33131 FILED
Jan 21 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

			3. Date incorporated or Qualified		
D. Dringing t Place of Pupings	Los Maines Address		07/07/1983		
2. Principal Place of Business	2a. Mailing Address	•	4. FEI Number	Applied For	
Suite Ant # ata	26		59-2185878	Not Applicable	
Suite, Apt, #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State			Election Campaign Financing	\$5.00 May Be	
28		Trust Fund Contribution Added to Fees			
Zip Country	Zip	Country	8. This corporation owes or has paid the curre		
24 25	29 30 Personal Property Tax due June 30, 🔀 Yes 📙 No				
g. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent		
ROTHMAN, DAVID		81 Name	81 Name		
200 S. BISCAYNE BLVD.		82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 3420					
MIAMI FL 33131		83	**************************************		
		84 City 85 Zip Code			
		64) City	FL !	85 Zip Code	
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					
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12	
TITLE D	DELETE	1.1 YITLE		Change Addition	
NAME THORNTON, JOHN W.		1,2 NAME		:	
STREET ADDRESS 200 S BISCAYNE #3420		1,3 STREET ADDRESS	1	1	
CITY-ST-ZIP MIAMI FL		1,4 CITY - ST - ZIP			
TITLE DV	DELETE	21 TITLE		Change Addition	
NAME ROTHMAN, DAVID B	-	2.2 NAME			
STREET ADDRESS 200 S BISCAYNE #3420		2,3 STREET ADDRESS			
CITY-ST-ZIP MIAM!, FL 00000		2. 4 CITY - ST - ZIP			
TITLE	DELETE	3.1 TITLE		Change Addition	
NAME		3.2 NAME	-		
STREET ADDRESS		3.3 STREET ADDRESS		ĺ	
CITY-ST-ZIP	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
	TH DECEME		L	1 overide T Mannan	
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS		}	
CITY-ST-ZIP	T per ere	4.4 CITY-ST-ZIP		1 Ohron 1 A 1280	
TITLE	☐ DELETE	5.1 TITLE	L	ChangeAddition	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS		1	
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		Change Addition	
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS		1	
CITY-ST-ZIP		6.4 CITY-ST-ZIP			
14. I hereby certify that the information supplied wit	h this filing does not qualify for		Section 119.07(3)(i), Florida Statutes, I further certif	y that the information	