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

**PROFIT** CORPORATION ANNUAL REPORT



H ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # G75674

(3)

METRO BANK OF DADE COUNTY

Principal Place of Business	Mailing Address	c i massifi dan i labat dreid die i dans dies dies gest dies gest dies gebet dies filles
1390 S. DIXIE HIGHWAY CORAL GABLES FL 33146	1390 S. DIXIE HIGHWAY CORAL GABLES FL 33146	
		DO NOT WRITE IN THIS SPACE
		3. Date Incorporated or Qualified 12/21/1983
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied F
21	26	<b>59-2360317</b> Not Applie
Suite, Apt. #, etc.	Suita, Apt #, etc	5. Certificate of Status Desired See Required Fee Required
City & State	City & State	6. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution  Added to Fees
Zip Country	├──┐ ' <b>├</b> ──┐ '	This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.  Yes No
24 25	29 30 30	Personal Property Tax due June 30. L. Yes L. No.

84 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 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.

82

83

Street Address (P.O. Box Number is Not Acceptable)

SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, type-I or printed name of registered rights and Min Cappok abli OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 THLE EGGLAND, DANIEL C. NAME 1.2 NAME 7395 SW 166TH STREET STREET ADORESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MINTZ, LAWRENCE NAME 2.2 NAME 2333 BRICKELL AVE. STREET ADDRESS 2 3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE BELCHER JR. J ANTHONY NAME 3.2 NAME 9425 SW 94TH ST STREET ADDRESS 3.3 STREET ADDRESS MIAM! FL CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE O'ROURKE, JACK NAME 4.2 NAME 7261 SW 146 ST. CIR STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE HAVENICK, FRED S NAME 5.2 NAME 369 LEUCADENDRA DR STREET ADDRESS 5.3 STHEET ADDRESS **CORAL GABLES FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE LEDER, NATHAN I NAME 6.2 NAME 10240 SW 128TH ST STREET ADDRESS 6.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 64 CITY-ST-ZIP

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 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 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 13 if changed, or on an attachment with an address.

1/2/80

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

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**FILED** 

May 21 1998 8:00am

Secretary of State