


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

FILED
Mar 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J04626 (4)
1. Corporation Name
JOSEPH L. COLE, INC.

Principal Place of Business Mailing Address
13040 SW 80TH ST 13040 SW 80TH ST
MIAMI FL 33183 MIAMI FL 33183



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		03/18/1986	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2649851	
24 Country		29 Country		30	
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9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
COLE, JOSEPH L. 2841 S.W. 92ND COURT MIAMI FL 33185		81 Name KIM M COLE 82 Street Address (P.O. Box Number is Not Acceptable) 13040 SW 80 ST. 83 84 City MIAMI FL 85 Zip Code 33183	

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 Kim M Cole Kim M Cole 3/23/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	1.1 TITLE SECRETARY	Change Addition	
NAME COLE, JOSEPH L.	1.2 NAME KIM M. COLE	Change Addition	
STREET ADDRESS 2841 S.W. 92ND COURT	1.3 STREET ADDRESS 13040 SW 80 ST.	Change Addition	
CITY-ST-ZIP MIAMI FL	1.4 CITY-ST-ZIP MIAMI, FLA. 33183	Change Addition	
TITLE	2.1 TITLE	Change Addition	
NAME	2.2 NAME	Change Addition	
STREET ADDRESS	2.3 STREET ADDRESS	Change Addition	
CITY-ST-ZIP	2.4 CITY-ST-ZIP	Change Addition	
TITLE	3.1 TITLE	Change Addition	
NAME	3.2 NAME	Change Addition	
STREET ADDRESS	3.3 STREET ADDRESS	Change Addition	
CITY-ST-ZIP	3.4 CITY-ST-ZIP	Change Addition	
TITLE	4.1 TITLE	Change Addition	
NAME	4.2 NAME	Change Addition	
STREET ADDRESS	4.3 STREET ADDRESS	Change Addition	
CITY-ST-ZIP	4.4 CITY-ST-ZIP	Change Addition	
TITLE	5.1 TITLE	Change Addition	
NAME	5.2 NAME	Change Addition	
STREET ADDRESS	5.3 STREET ADDRESS	Change Addition	
CITY-ST-ZIP	5.4 CITY-ST-ZIP	Change Addition	
TITLE	6.1 TITLE	Change Addition	
NAME	6.2 NAME	Change Addition	
STREET ADDRESS	6.3 STREET ADDRESS	Change Addition	
CITY-ST-ZIP	6.4 CITY-ST-ZIP	Change Addition	

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

SIGNATURE: Kim M Cole Kim M Cole 3/23/98 305 385-7240

CP2E034 (10/97)