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

STREET ADDRESS

SIGNATURE:

Apr 30 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (1)PROSPERITY PROPERTIES CORP. Principal Place of Business Mailing Address 11215 NW 44TH ST 11215 NW 44TH ST CORAL SPRINGS FL 33065-7203 CORAL SPRINGS FL 33065-7203 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/11/1987 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0018307 Not Applicable Suite, Apt. #. etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name WU, JAMES G. 11215 NW 44TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33065** 83 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 obligations of Section 607 0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when rainstating) DATE CRZE034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 11 TitiE Change TITLE WU, JAMES G. NAME 1.2 NAME 11215 NW 44TH ST 1.3 STREET ADDRESS STREET ADORESS CORAL SPRINGS FL 14 CITY - ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 2 1 TITLE 2.2 NAME 23 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NAME 32 NAME STREET ADDRESS 3 3 STHEFT ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE 4 2 NAME NAME A 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-S1-ZIP DELETE Change Addition 51 1/TLE 5.2 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition NAME 62 NAME

63 STREET ADDRESS 6.4 C(TY - ST - Z(P 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 suppliemental 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 attaginnent with my address.

James Wil

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