


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

FILED  
Apr 06, 1999 8:00 am  
Secretary of State

04-06-1999 90074 026 \*\*\*158.75

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| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1999 |  | FLORIDA DEPARTMENT OF STATE<br>Katherine Harris<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

DOCUMENT # K16855

1. Corporation Name  
WOODSIDE DEVELOPMENT, INC.

|   |  |
|---|--|
| Principal Place of Business<br>C O TOTAL BUSINESS SOLUTIONS<br>33 SE 7TH ST. STE G<br>BOCA RATON FL 33432<br>US | Mailing Address<br>C O ERNESTO SANCHEZ, P.A.<br>814 PONCE DE LEON BLVD. STE 505<br>CORAL GABLES FL 33134 |
|---|--|

DO NOT WRITE IN THIS SPACE

|  |                                |
|--|--------------------------------|
| 3. Date Incorporated or Qualified<br>03/02/1988  | Applied For<br>Not Applicable  |
| 4. FEI Number<br>65-0046393  |                                |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/>   | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>  | \$5.00 May Be Added to Fees    |
| 8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No |                                |

|   |  |
|---|--|
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country |
|---|--|

9. Name and Address of Current Registered Agent

SANCHEZ, ERNESTO PA  
814 PONCE DE LEON BLVD. STE 505  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

|   |                |
|---|----------------|
| 81 Name   |                |
| 82 Street Address (P.O. Box Number is Not Acceptable) |                |
| 83  |                |
| 84 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 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 DIRECTORS  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12             |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
|---|---|---------------------------------|---------------------------------|------|------------------------|--|----------------|--------------------------|--|-------------|---------------------|--|-------|------|---------------------------------|------|--------------|--|----------------|--------------------------|--|-------------|---------------------|--|-------|----|---------------------------------|------|-----------------------|--|----------------|------------------------|--|-------------|---------------|--|-------|--|---------------------------------|------|--|--|----------------|--|--|-------------|--|--|-------|--|---------------------------------|------|--|--|----------------|--|--|-------------|--|--|-------|--|---------------------------------|------|--|--|----------------|--|--|-------------|--|--|---|-----------|---|----------|--|--------------------|--|-----------------|--|-----------|---|----------|--|--------------------|--|-----------------|--|-----------|---|----------|--|--------------------|--|-----------------|--|-----------|---|----------|--|--------------------|--|-----------------|--|-----------|---|----------|--|--------------------|--|-----------------|--|-----------|---|----------|--|--------------------|--|-----------------|--|
| <table><tr><td>TITLE</td><td>DP</td><td><input type="checkbox"/> DELETE</td></tr><tr><td>NAME</td><td>SPIELBERGER, LADISLAUS</td><td></td></tr><tr><td>STREET ADDRESS</td><td>153 E. PALMETTO PARK RD.</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>BOCA RATON FL 33432</td><td></td></tr><tr><td>TITLE</td><td>DVPS</td><td><input type="checkbox"/> DELETE</td></tr><tr><td>NAME</td><td>KEME, GEORGE</td><td></td></tr><tr><td>STREET ADDRESS</td><td>153 E. PALMETTO PARK RD.</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>BOCA RATON FL 33432</td><td></td></tr><tr><td>TITLE</td><td>VP</td><td><input type="checkbox"/> DELETE</td></tr><tr><td>NAME</td><td>SPIELBERGER, NICHOLAS</td><td></td></tr><tr><td>STREET ADDRESS</td><td>153 E PALMETTO PARK RD</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>BOCA RATON FL</td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> DELETE</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> DELETE</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> DELETE</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table> | TITLE   | DP                              | <input type="checkbox"/> DELETE | NAME | SPIELBERGER, LADISLAUS |  | STREET ADDRESS | 153 E. PALMETTO PARK RD. |  | CITY-ST-ZIP | BOCA RATON FL 33432 |  | TITLE | DVPS | <input type="checkbox"/> DELETE | NAME | KEME, GEORGE |  | STREET ADDRESS | 153 E. PALMETTO PARK RD. |  | CITY-ST-ZIP | BOCA RATON FL 33432 |  | TITLE | VP | <input type="checkbox"/> DELETE | NAME | SPIELBERGER, NICHOLAS |  | STREET ADDRESS | 153 E PALMETTO PARK RD |  | CITY-ST-ZIP | BOCA RATON FL |  | TITLE |  | <input type="checkbox"/> DELETE | NAME |  |  | STREET ADDRESS |  |  | CITY-ST-ZIP |  |  | TITLE |  | <input type="checkbox"/> DELETE | NAME |  |  | STREET ADDRESS |  |  | CITY-ST-ZIP |  |  | TITLE |  | <input type="checkbox"/> DELETE | NAME |  |  | STREET ADDRESS |  |  | CITY-ST-ZIP |  |  | <table><tr><td>1.1 TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>1.2 NAME</td><td></td></tr><tr><td>1.3 STREET ADDRESS</td><td></td></tr><tr><td>1.4 CITY-ST-ZIP</td><td></td></tr><tr><td>2.1 TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>2.2 NAME</td><td></td></tr><tr><td>2.3 STREET ADDRESS</td><td></td></tr><tr><td>2.4 CITY-ST-ZIP</td><td></td></tr><tr><td>3.1 TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>3.2 NAME</td><td></td></tr><tr><td>3.3 STREET ADDRESS</td><td></td></tr><tr><td>3.4 CITY-ST-ZIP</td><td></td></tr><tr><td>4.1 TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>4.2 NAME</td><td></td></tr><tr><td>4.3 STREET ADDRESS</td><td></td></tr><tr><td>4.4 CITY-ST-ZIP</td><td></td></tr><tr><td>5.1 TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>5.2 NAME</td><td></td></tr><tr><td>5.3 STREET ADDRESS</td><td></td></tr><tr><td>5.4 CITY-ST-ZIP</td><td></td></tr><tr><td>6.1 TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>6.2 NAME</td><td></td></tr><tr><td>6.3 STREET ADDRESS</td><td></td></tr><tr><td>6.4 CITY-ST-ZIP</td><td></td></tr></table> | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 1.2 NAME |  | 1.3 STREET ADDRESS |  | 1.4 CITY-ST-ZIP |  | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 2.2 NAME |  | 2.3 STREET ADDRESS |  | 2.4 CITY-ST-ZIP |  | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 3.2 NAME |  | 3.3 STREET ADDRESS |  | 3.4 CITY-ST-ZIP |  | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 4.2 NAME |  | 4.3 STREET ADDRESS |  | 4.4 CITY-ST-ZIP |  | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 5.2 NAME |  | 5.3 STREET ADDRESS |  | 5.4 CITY-ST-ZIP |  | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 6.2 NAME |  | 6.3 STREET ADDRESS |  | 6.4 CITY-ST-ZIP |  |
| TITLE   | DP  | <input type="checkbox"/> DELETE |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| NAME  | SPIELBERGER, LADISLAUS  |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| STREET ADDRESS  | 153 E. PALMETTO PARK RD.  |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| CITY-ST-ZIP   | BOCA RATON FL 33432   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| TITLE   | DVPS  | <input type="checkbox"/> DELETE |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| NAME  | KEME, GEORGE  |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| STREET ADDRESS  | 153 E. PALMETTO PARK RD.  |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| CITY-ST-ZIP   | BOCA RATON FL 33432   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| TITLE   | VP  | <input type="checkbox"/> DELETE |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| NAME  | SPIELBERGER, NICHOLAS   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| STREET ADDRESS  | 153 E PALMETTO PARK RD  |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| CITY-ST-ZIP   | BOCA RATON FL   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| TITLE   |   | <input type="checkbox"/> DELETE |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| TITLE   |   | <input type="checkbox"/> DELETE |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| TITLE   |   | <input type="checkbox"/> DELETE |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 1.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 1.2 NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 1.3 STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 1.4 CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 2.2 NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 2.3 STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 2.4 CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 3.2 NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 3.3 STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 3.4 CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 4.2 NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 4.3 STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 4.4 CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 5.2 NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 5.3 STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 5.4 CITY-ST-ZIP   |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 6.2 NAME  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 6.3 STREET ADDRESS  |   |                                 |                                 |      |                        |  |                |                          |  |             |                     |  |       |      |                                 |      |              |  |                |                          |  |             |                     |  |       |    |                                 |      |                       |  |                |                        |  |             |               |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |       |  |                                 |      |  |  |                |  |  |             |  |  |   |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |           |   |          |  |                    |  |                 |  |
| 6.4 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED  
LADISLAUS SPIELBERGER

3/27/99  
Date

(305) 441-2040  
Daytime Phone #

CR2E034 (11/98)