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 # K41230

(9)

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FILED
May 01 1998 8:00am
Secretary of State

COSC	AN PRESIDENTIAL INC.			
Principal Plac	e of Business	Mailing Address		
		20003 BISCAYNE BLVD		
20803 BISCAYNE BLVD 20803 BISCAYNE BLVD 103				
AVENTURA FL 33180 AVENTURA FL 33180				DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualified
9 Principal C	Place of Business	9a Mailing Address	· · · · · · · · · · · · · · · · · · ·	10/20/1988 4. FEI Number Applied For
—	Tace of Business	2a. Mailing Address		
21 Suite, Apt.	# etc	Suite, Apt. #, etc.		65-0078720 Not Applicable \$8.75 Additional
22	1 , 0.0.	27		5. Certificate of Status Desired Fee Regulred
City & Stat	10	City & State		6. 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 current year Intangible
24	25		90	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
	OLFE, LEON J ESQ.		81 Name	•
	100 SE 2ND STREET			t Address (P.O. Box Number is Not Acceptable)
	TH FLOOR			
ML	AMI FL 33131-2130		83	
			84 City	85 Zip Code
				FL 8 2 Pools
office or a agent. I a SIGNATURE	registered agent, or both, in the State o im familiar with, and accept the obligati Signature, typed or printed name of registered agent			d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered resourced when reinstating) OATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	PD Change X Addition
NAME	PRINGLE, BILL		1.2 NAME	Lamondin, Richard E.
STREET ADDRESS	181 BAY STR, STE 4200		1.3 STREET ADDRESS	20803 Biscayne Blvd., Suite 103
CITY-ST-ZIP	TORONTO, ONTARIO		1.4 CITY-ST-ZIP	Aventura, FL 33180
TITLE	DV	☐ DELETE	2.1 TITLE	VS Change 🙀 Addition
NAME	CULLINGWORTH, ROSS		2.2 NAME	Semler, Daniel
STREET ADDRESS	181 BAY STR SUITE 4200		2.3 STREET ADDRESS	20803 Biscayne Blvd., Suite 103
CITY-ST-ZIP	TORONTO ON		2.4 CITY-ST-ZIP	Aventura, FL 33180
TITLE	V	☐ DELETE	3.1 TITLE	V Change X Addition
NAME	ALPER, SUE		3.2 NAME	Kerrigan, Paul
STREET ADORESS	20803 BISCAYNE BLVD, SUITE	103	3.3 STREET ADDRESS	
CITY-ST-ZIP	AVENTURA FL 33180		3.4. CITY-ST-ZIP	Toronto, Ontario Canada OCMDJ2T3
TATLE	V	☐ DELETE	4.1 TITLE	AS Change X Addition
NAME	HALL, CHARLES B		4. 2 NAME	Zessner, Michael
STREET ADDRESS	20803 BISCAYNE BLVD., STE.	103	4.3 STREET ADDRESS	
CITY-ST-ZIP	AVENTURA FL 33180		4.4 CITY-ST-ZIP	Toronto, Ontario Canada OCMDJ2T3
TITLE	AVAS	DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME	TACHER, ROBERTA	400	5.2 NAME	
STREET ADDRESS	20803 BISCAYNE BLVD., STE.	103	5.3 STREET ADDRESS	
CITY-ST-ZIP	AVENTURA FL 33180	Legiere	5.4 CITY-ST-ZIP	The same of the sa
TITLE	V	DELETE	6.1 TITLE	Change Addition
NAME	PIAZZA, ALBERT	. 100	6.2 NAME	
STREET ADDRESS	20803 BISCAYNE BLVD, SUITE	103	6.3 STREET ADDRESS	į.
CITY-ST-ZIP	AVENTURA FL 33180		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing doos 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 eath; 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.

CICMATURE.

larte Tev

Roberta Tacher

4-21-98

(305) 935-0255

CR2E034 (10/97)