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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

Jupiter-Miami Warehouse					
Principal Place of Business	Mailing Address	T (ODIBIE) DEL DIBBE (EIDO FEIDI OREI DIEL D			
% ROBERT P. RACHLIN 11120 N. KENDALL DR.: #201 MIAMI FL 33176	% ROBERT P. RACHLIN 11120 N. KENDALL DR., #201 MIAMI FL 33176	DO NOT WRITE IN			
		3. Date Incorporated or Qualified 11/04/1988			
2. Principal Place of Business 21	28. Mailing Address 26	4. FEI Number 65-0126276			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Certificate of Status Desired			
City & State	City & State	Election Campaign Financing     Trust Fund Contribution			
Zip         Country           24         25	Zip         Country           29         30	This corporation owes or has paid to Personal Property Tax due June 30			

## **FILED** May 11 1998 8:00am Secretary of State

JUPITE	er-Miami ware	HOUSE ASS	OCIATES, IN	C.							
Principal Piac	e of Business		Mailing Addr	ess				) (ODEDIE) Wit DIRON (EION EFIOL INE			E41 01914 1003
% ROBERT I		% ROBERT									
11120 N. KENDALL DR., #201			11120 N. KENDALL DR., #201				DO NOT WR	ITE IN THIS	SPACE		
MIAMI FL 93	176	MIAMI FL 33176			-	3. Date Incorporated or Qualified					
								11/04/1988			
2. Principal Place of Business			28. Mailing Address					4. FEI Number		A	pplied For
21		26				65-0126276		N	ot Applicable		
	ite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional		
22 City 8 City		.,	27								equired
City & Stat	е		City & State				<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>	, D		May Be to Fees	
Zip	Cou	untry	28   		Countr	v		This corporation owes or has			
24	25	<i>,</i>	29		30	,		Personal Property Tax due Ju			
1	9. Name and Ad	dress of Current						10. Name and Address of New		Agent	
R/	CHLIN, ROBERT I	Ρ.			81	Nam	е				
	120 N. KENDALL				82	Stree	t Addres	s (P.O. Box Number is Not Accep	table)		
	AMI FL 33176								<u> </u>		
					83	3					
					84	City				<b>85</b> Zip	Code
44 6"		002.050	10074500 5			<u></u>		ation and a state of the state	Fl	<b>-</b>	to replatored
11. Pursuant office or r	to the provisions of a registered agent, or t	sections 607.0502 both, in the State (	and 607.1508, F of Florida. Such c	iorida Statute: hange was al	s, the abov Ithorized b	e-name y the co	ea corpor orporation	ation submits this statement for the 's board of directors. I hereby ac	cept the ap	or changing i pointment as	registered registered
agent. I a	ım f <b>a</b> miliar with, and a	accept the obligat	tions of, Section €	607.05 <b>0</b> 5, Flor	ida Statute	S.					
SIGNATURE	Signature, typed or printed	name of recustored account	and tale if emplicable	(NOTE	Registered An	ent s goali	ure required	when reinstaling)	DATE		····-
12.	Ogrania D. Typico di printo a	OFFICERS AND		(1.0.1Z	13.			ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	PD			DELETE	1.1 TITLE					Change	Addition
NAME	RACHLIN, ROE	Bert P.			1.2 NAME						
STREET ADDRESS	11120 N. KEN	DALL DR.,201			1.3 STREE	T ADDRESS	s				
CITY-ST-ZIP	MIAMI FL				1.4 CITY-	ST - ZIP					
TITLE			L	DELETE	2.1 TITLE					☐ Change	☐ Addition
NAME -					2.2 NAME		-				
STREET ADDRESS					2 3 STREE		s [	• 1			
CITY-ST-ZIP	-		<del>_</del>	DELETÉ	2 4 CiTY-	ST-ZIP				Change	Addition
TITLE			_	) VLLCIC	3.1 TITLE					FT cuands	L_1 A0010011
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STREET ADDRESS					1		1				
CITY-ST-ZIP				DELETE	3.4. CITY- 4.1 TITLE	01-21	+-	****		Change	Addition
NAME			_		4. 2 NAME						
STREET ADDRESS	1					Taddres:	s				
CITY-ST-ZIP	1				4.4 City-						
TITLE				DELETE	5.1 TITLE			, ' '	***************************************	Change	☐ Addition
NAME					5.2 NAME						
STREET ADDRESS	i				5.3 STREE	T ADDRESS	s				
CITY-ST-ZIP					5.4 CITY-	ST-ZIP				· · · · · · · · · · · · · · · · · · ·	
TITLE				DELETE	6.1 TITLE					☐ Change	Addition
NAME					6.2 NAME						
STREET ADDRESS					6.3 STREE	T ADDRESS	s				
CITY-ST-ZIP	!				6.4 CITY-	ST-ZIP	1				

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 occiver or trustree 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 attachined 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 in Section 119.07(3)(i). Florida Statutes. I further certify that the information stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certificate in Section 119.07(3)