

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Sep 01 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # K67655  
 1. Corporation Name  
 ERSCO, INC.

Principal Place of Business Mailing Address  
 3731 N. Country CLUB DR.  
 #2223  
 N. MIAMI BEACH, FL 33180

DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified  
 02/22/1989

2. Principal Place of Business 2a. Mailing Address  
 21 3731 N. Country CLUB DR. 26 3880 SHERIDAN STREET  
 Suite, Apt #, etc. Suite, Apt #, etc.  
 22 2223 27  
 City & State City & State  
 23 AVENTURA, FL 28 HOLLYWOOD, FL  
 Zip Country Zip Country  
 24 33180 25 USA 29 33021 30 USA

4. FEI Number Applied For Not Applicable  
 65-0103688  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
 REUVEN SHEFER  
 3731 N. Country CLUB DR #2223  
 N. MIAMI BEACH, FL 33180

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 3731 N. Country CLUB DR  
 83 #2223  
 84 City AVENTURA FL 85 Zip Code 33180

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	D/P	<input type="checkbox"/> DELETE
NAME	REUVEN SHEFER	
STREET ADDRESS	3731 N. Country CLUB DR #2223	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33180	
TITLE	D/V/T/S	<input type="checkbox"/> DELETE
NAME	ELLA SHEFER	
STREET ADDRESS	3731 N. Country CLUB DR #2223	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33180	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	REUVEN SHEFER	
1.3 STREET ADDRESS	3731 N. Country CLUB DR. #2223	
1.4 CITY-ST-ZIP	AVENTURA, FL 33180	
2.1 TITLE	D/V/T/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	ELLA SHEFER	
2.3 STREET ADDRESS	3731 N. Country CLUB DR #2223	
2.4 CITY-ST-ZIP	AVENTURA, FL 33180	
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	500002632255	
5.3 STREET ADDRESS	-09/04/98-01064--034	
5.4 CITY-ST-ZIP	***165.00	
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.

SIGNATURE: R. Shefer Reuven SHEFER 8/22/98 936-9696 (305)

CR2E034 (5/98)

(2)

ANNUAL REPORTS FILINGS  
DIVISION OF CORPORATIONS  
409 EAST GAINES ST.  
TALLAHASSEE, FL 32399

8/22/98

RE: Document K67655  
ERSCO, INC.

Please be advised that the 1998 Annual Report Form never reached us. We have discovered that the mailing address on record with the state office contains a typographical error (see attached printout).

Enclosed please find a completed Annual Report Form with one check for \$165<sup>00</sup>.

Thank you,

R. Shefer

REUVEN SHEFER