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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED Apr 09 1998 8:00am Secretary of State

PERTIES CORP.								
Principal Place of Business Mailing Address								
2865 SOUTH BAYSHORE DRIVE SUITE 1002			SUITE 10	2665 SOUTH BAYSHORE DRIVE SUITE 1002			DO NOT WRITE IN THIS SPACE	
Miami Fl 331 Us	133			MIAMI FL 33133 US			3. Date Incorporated or Qualified	
00			00				07/03/1989	
2. Principal Place of Business			2a. Mailin	2a. Mailing Address			4. FEI Number Applied For	
21			26	26			65-0141582 Not Applicable	
Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22			27				Fee Required	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be	
23		Country	26				Trust Fund Contribution	
Z ip 24		Country	Zip	Ŀ	Countr	У	6. This corporation owes or has paid the current year Intangible	
24]	9. Name	25 and Address of Curre	29 At Registered A		30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
TE	************	· · · · · · · · · · · · · · · · · · ·		-	81	Name	10, manual state of the state o	
TERREMARK CORPORATE AGENTS INC. 2801 SOUTH BAYSHORE DRIVE, 19TH FLOOR								
MIAMI FL 33133					82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
					83			
					84	City	85 Zip Code	
					٦	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, typico	d or printed name of required age		oln (NOTE		ent signature re	equired when reinstating) DATE	
12. Title	D	OFFICERS AN	D DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	_	PETER L.		□ ptreit	1.1 TITLE		☐ Change ☐ Addition	
STREET ADDRESS		ARY ST, FIFTH FL			1.2 NAME	T ADDRESS		
CITY-ST-ZIP	MIAMI F	•			1.3 STREE			
TITLE	D	<u> </u>		DELETE	2.1 TITLE	31-21	☐ Change ☐ Addition	
NAME		, SHERWOOD M.		—	2.2 NAME			
STREET ADDRESS		ARY ST, FIFTH FL				T ADDRESS		
CITY-ST-ZIP	MIAMI F				2. 4 CITY			
TITLE	DP			DELETE	3.1 TITLE	<u> </u>	☐ Change ☐ Addition	
NAME	WEISER	, WARREN			3.2 NAME			
\$TREET ADDRESS	2665 S	BAYSHORE DR #100	2		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI F	<u>t</u>			3.4. CITY-	ST-ZIP		
TITLE	D			DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME		i, donald e.			4. 2 NAME			
STREET ADDRESS		ary st, fifth fl			4.3 STREE	7 ADDRESS		
CITY-ST-ZIP	MIAMI F	<u>L</u>		_	4.4 CITY+	ST-ZIP		
TITLE	D			DELETE	5.1 TITLE		Change Addition	
NAME		, THOMAS			5.2 NAME	i i		
STREET ADDRESS		ARY ST, FIFTH FL			1	T ADDRESS		
CITY-SI-ZIP	MIAMI F	L		D portre	5.4 CiTY-	ST-ZIP		
TITLE				☐ DELETÉ	6.1 TITLE		☐ Change ☐ Addition	
NAME					6.2 NAME			
STREET ADDRESS						T ADDRESS		
CITY-ST-ZIP	L.,,,.				6.4 CITY-	ST-ZIP		

Thereby certify that the information copplied 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 of supplied with annual report is trie and accurate and that my signature shall have the same legal effect as if made under oath; that I arm an officer or director of the corporation or the receiver or trustee in province the corporation of the corpo

4/3/98