## 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 # L27121

(7)

DAWN'S BIG T SERVICES, INC.

FILED May 05 1998 8:00am Secretary of State

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Principal Place	e of Business	Mailing Address		T TO DESCRIPTION OF THE STATE OF STATE STATE OF STATE	St. Binit ninst gonit nints (Bo)
18300 COLLINS AVE N. MIAMI BCH FL 33160 US		420 LINCOLN RD #235 MIAMI BCH. FL 33139		DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
9 Princip of P	lace of Business	2a. Mailing Address		10/31/1989 4. FEI Number	Applied For
21 Principal P	IdC# OF DUSINESS	26 20900 W.	Dixie Hwx	65-0157206	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	DIVIE	., _	\$8.75 Additional
22		27 🔥		5. Certificate of Status Desired	Fee Required
City & State	е	City & State	And DELLI	6. Election Campaign Financing	\$5.00 May Be
23	Constant		AMI BEACH	Trust Fund Contribution	Added to Fees
Zip 24	Country 25	29 33180 3	Country A	<ol><li>This corporation owes or has paid the creation Personal Property Tax due June 30.</li></ol>	urrent year Intangible Yes  No
[24]	9. Name and Address of Current		30, 02.	10. Name and Address of New Registered	
FEDER, LAWRENCE H. B1 Name					
2450 HOLLYWOOD BLVD			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	ITE 401				
НО	LLYWOOD FL 33020		83		
			84 City		85 Zip Code
44 5	1. 4			F	af ah an alsa Ba as al-basa al
office or r	egistered agent, or both, in the State of	of Florida. Such change was au	thorized by the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typod or profind name of registered agen	Lang lite if soulcable (NOTE:	Registered Agont signature require	ed when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	Š	☐ DELETE	1.1 TITLE		Change Addition
NAME	TURETSKY, IRVING		1.2 NAME		
STREET ADDRESS	<b>29</b> 0 174TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH. FL	T offere	1.4 CITY - ST - ZIP		
TITLE	P Delivery Delivery	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME OVOCET A DODGEC	SCHILLING, DAWN A.		2.2 NAME		
STREET ADORESS	222 POINCIANA ISLAND DR Miami Beach Fl		2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE	VP	☐ DELETE	31 TITLE		Change Addition
NAME	NESS, GERALD J.		3.2 NAME		·
STREET ADDRESS	4101 PINETEE DR., #1814		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH. FL		3.4 <sub>y</sub> City-St-ZiP		
TALE	Ť	DELETE	4.1 TiTLE		Change Addition
NAME	NUNBERG, VICTOR L.		4. 2 NAME		
STREET ADDRESS	2460 NE 201 ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI BCH. FL	DELETÉ	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME			5.1 TITLE 5.2 NAME		C Change C Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 City-St-Zip		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby of Indicated	certify that the information supplied wit on this annual report or supplemental	In this filling does not qualify for annual report in true and accur	the exemption stated in rate and that my signatur	Section 119.07(3)(i), Florida Statutes. I further of shall have the same legal effect as if made of	sertify that the information under oath; that I am an
Indicated on this annual report or supplemental annual report in 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 of trustee enhancement of the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachmout with an address.					