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PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **L48164** **(2)**

1. Corporation Name
4481 N. W. 185 ST., INC.

Principal Place of Business	Mailing Address
1201 S. OCEAN DR. #219 SOUTH HOLLYWOOD FL 33019 US	1201 S. OCEAN DR. #219-S #219 SOUTH HOLLYWOOD FL 33019-2121 US

3. Date Incorporated or Qualified: 02/07/1990
3a. Date of Last Report: 02/19/1996

2. Principal Place of Business	2a. Mailing Address
21 1201 S. Ocean Drive	26 1201 So. Ocean Drive
Suite, Apt. #, etc. 22 # 2006 - South	Suite, Apt. #, etc. 27 #2006 - South
City & State 23 Hollywood, FL. 33019	City & State 28 Hollywood, FL.
Zip 24 33019	Country 25 U.S.A.
Zip 29 33019	Country 30 U.S.A.

4. FEI Number: 59-3056245 ☐ Applied For ☐ Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ARIAS, MARGUERITE 1201 S. OCEAN DR. #219 SOUTH HOLLYWOOD FL 33019	81 Name: Marguerite Arias 82 Street Address (P.O. Box Number is Not Acceptable): 1201 S. Ocean Dr. 83 #2006-South 84 City: Hollywood FL 85 Zip Code: 33019

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: Marguerite Arias, Pres. / Marguerite Arias DATE: 2/7/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARIAS, JACK 1201 S OCEAN DR, #219-SO HOLLYWOOD FL ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D ARIAS, JACK 1201 So. Ocean Drive #2006-South Hollywood, FL. 33019 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ARIAS, MARGUERITE 1201 S OCEAN DR, #219-SO HOLLYWOOD FL ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	P D ARIAS, Marguerite 1201 So. Ocean Drive #2006-South Hollywood, FL. 33019 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do 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: Marguerite Arias, Pres. Marguerite Arias 2/7/97 (954) 920-9530
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #