## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1898. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # I

1. Corporation Name LOO339 (7) PAUL DAVIS SYSTEMS OF GREATER MIAMI, INC.					
					818)) 618)) 616)) 816)) 816)) 186)
Principal Place	o of Business	Mailing Address			eleil bieil bibil bibil bibil bibil
Principal Place of Business		•			
7240 SW 39TH TERRACE MIAMI FL 33155		7240 SW 39TH TERRACE MIAMI FL 33155			
				DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified 04/18/1990	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0187589	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		27			Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28   Zip	Country	Trust Fund Contribution	Added to Fees
24	25	1 1 ' F	30	<ol><li>This corporation owes or has paid the corporation Property Tax due June 30.</li></ol>	Yes No
<del></del>	9. Name and Address of Current		201	10. Name and Address of New Registered	
POPDITKIN PALII					k100
7040 CW 90TH TERRACE				awrence K. How	urb
MIAMI FL 33155			82 Street Add	dress (P.O. Box Number is Not Acceptable)	~~
THE WILL SE COV			83		
•					
			84 City	rumi Fl	85 Zip Code
11. Pursuant to the provisions of sections 607 0502 and 607 1508. Florida Statidas, the phove named corporation submits this statement for the purpose of changing its registered					
office or i	registered agent, or both, in the State of am familiar with, and accept the obligat	of Ftorida. Such change was au	uthorized by the corpora	tion's board of directors. I hereby accept the app	ointment as registered
				President Ria	.ae
SIGNATURE	St resture, typed or printed name of registered agent a	and title if applicable (NO)	Hawkins  FE: Registered Agent signature re	quired when reinstaling) DATE	<u> </u>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	POPRITKIN, MARCOS R	•		awronce R. Hawkins	
STREET ADDRESS	7240 SW 39TH TERRACE		1.3 STREET ADDRESS	240 SW 39 Terrace	
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY-ST-ZIP	71ami, FL 33155	
TITLE	VP	[ ] DELETE	2 1 TITLE		Change Addition
NAME	VELOCCI, RALPH		2.2 NAME		
STREET ADDRESS	7240 SW 39TH TERRACE		2.3 STREET ADDRESS		ļ
CITY-ST-ZIP	MIAMI FL 33155		2.4 CITY-ST-ZIP		
TITLE	ST	DELETE	3.1 TITLE		Change Addition
NAME	POPRITKIN, ROSA	. •	3.2 NAME		
STREET ADDRESS	7240 SW 39TH TERRACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155		3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TiTLE		Change Addition
NAME			4.2 NAME		•
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		[] DELETE	5.1 TITLE		Change Addition
NAME			. 5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition

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.

6.2 NAME

6 3 STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP

8.2.98 (305)260.0

**FILED** 

Secretary of State

Aug 06 1998 8:00 am