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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(1)

FILED

Jan 28 1998 8:00am

Secretary of State

Principal Pilece of Euseress Makers S. CBSTGARTEN 1907 ISSCANRE BLVD. MANI FL 3180 2. Pilicipal Places of Business 2. Pilicipal Places of Business 3. Date Incorporated or Custified 0,50(3)990. 4. FET Number 0,50(0) Apr. 4", etc. 3. Date Incorporated or Custified 0,50(3)990. 4. FET Number 0,50(0) Apr. 4", etc. 3. Suito, Apr. 4", etc. 3. Sui	OBSTA	ART, INC.												
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Zip Country Zip Country B. This corporation was not has paid the current Year Internal Pulper Register Regi	City & Star	le			City & State				6. Election Campaign Financing		\$5.00	May Be		
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Section 607.0505. Florids Statutes. The above named corporation's submits this statement for the purpose of changing list registered office or registered agent, or both, in the State of Forids. Such change was address the Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Section 607.0505. Florids Statutes. The above registered agent and the Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Section 607.0505. Florids Statutes. The Above registered office or registered agent and to registered Agent spatial statutes. The Above Registered Agent spatial statutes	23										Trust Fund Contribution		Added	to Fees
B. Name and Address of Current Registered Agent OBSTGARTEN, HUBERT S. ADVENTURA MALL SHOPPING CENTER, RM. 1319 19501 BISCAYNE BLVD. MIAMI FL 33180 B2 Street Address (P.O. Box Number is Not Acceptable) B2 Street Address (P.O. Box Number is Not Acceptable) B3 City FL B5 Zip Code B4 City FL B5 Zip Code T1. 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 agent. In a final manual with, and accept the objections of, Section 607.6505, Florida Statutes. SIGNATURE B4 City FL B5 Zip Code T1. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered agent. In a final manual with, and accept the objections of, Section 607.6505, Florida Statutes. SIGNATURE B7 OFFICERS AND DIRECTORS B82 STREET ADDRESS B82 City - 1.1 In It In In It In It In It In In In It In It In It In It In In In It In In It In In In It In In In In It In In In In In It In						Zip	⊢ -¬	ountry	•					
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MAMI FL 33180 83 City FL 85 Zip Code 11. Pursuant to the provisions of Socians 607.0502 and 607.1508, florida Statutos, be above, mand corporation submits this statement for the purpose of changing its 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, 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, 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 ag				NG CENT	EK, H	RM. 1319		82	Stree	1 Addres	ss (P.O. Box Number is Not Acceptab	le)		
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11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OBSTGARTEN, HUBERT S 21248 HARBOR WAY, #243 AVENTURA FL 14. CITY-ST-ZIP NAME SIRRET ADDRESS CITY-ST-ZIP TITLE OBLETE 21 TITLE OBLETE 31 TITLE OChange Addition NAME SIRRET ADDRESS GITY-ST-ZIP TITLE OLITICAL ACTIV-ST-ZIP ACT	IVI	AMI PL 331	0 0											
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SIGNATURE Sign	11. Pursuant	to the provisi	ions of Sections	607.0502 a	nd 60	7.1508, Florida Statut	es, the	<u> </u>	e-name	d corpor	ration submits this statement for the p		L_L changing	its registered
SIGNATURE Signature, typed or printed ranner of regretated agent and late of Agridicated Agent separated recovered when reinstaining) DATE	office or i	registered ag am familiar wit	ent, or both, in t	he State of I	Florid	la. Such change was a Section 607 0505. Flo	authoriz orida St	ed by	the co	rporation	n's board of directors. I hereby accep	it the appo	intment a	s registered
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14. December certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, Lighter certify that the information	CITY-ST-ZIP	nortify that the	information	valiad with 4	hie 6	ing dogs not qualify to				lod in Co	notion 110 07/2\(\text{i}\) Elorido Ctatutos II	further on-	lifu that th	a information

Indicated on this annual report or supplied with this ming does not quality for the exemption stated in 1820/(5/ft), Florida Statutes. Thirder certify that if 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 of an attachment with an address.

1-19-91