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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Apr 17 1998 8:00am Secretary of State

Zip Country Zip Country Zip Country Zip Country Zip Country Zip Signature by Personal Property Tax due June 30.
Principal Piace of Business 8000 S.W. 92ND STREET SUITE 10N MIAMI FL 33156 BOO S.W. 92ND STREET SUITE 10N MIAMI FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified Obj. 1990 6. Do Not Write IN THIS SPACE 3. Date Incorporated or Qualified Obj. 1990 6. Do Not Write IN THIS SPACE 3. Date Incorporated or Qualified Obj. 1990 6. South, April or Incorporated or Qualified Obj. 1990 7. Do Not Applicable Not Applicable Not Applicable Suite, April of, etc. 8. Certificate of Istus Desired Fee Required City & State Address of New Registered Agent 10. Name and Address of New Registered Agent City & City City & City
Principal Place of Business 800 SW 92ND STREET SUITE 104 MIAMI FL 33156 2. Principal Place of Business 3. Date Incorporated or Qualified 05/30/1990 4. FEL Number 65-0199802 Not Applicable 5. Certificate of Status Desired 5. Certificate of Status Des
BECO S.W. 92ND STREET SUITE 104 MIAMI FL 33156 2. Principal Place of Business 2. A. Mailing Address 3. Date Incorporated or Qualified 05/30/1990 2. Principal Place of Business 2. A. FEI Number 6. FEI Number 6. Election Campaign Financing Fee Required Fee
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27 City & State
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Zip Country Zip Country Zip Country Zip Country Zip Country Zip Signature by Personal Property Tax due June 30.
POSADA, VIVIAN 8305 S.W. 103RD STREET MIAMI FL 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Vivian Registered Agent 84 City 85 Zip Code 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, are 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, are 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, are 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, are failing to the originations of Section 607.0505, Florida Statutes SIGNATURE 12. OFFI ICEPTS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 12. DELETE 11. TITLE 12. Change Addition POSADA, VIVIAN 12. NAME 13. STREET ADDRESS 8305 S.W. 103RD STREET 13. STREET ADDRESS
POSADA, VIVIAN 8305 S.W. 103RD STREET MIAMI FL 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 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 oiligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type of a gend and filter applicable. (Not1 Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D DELETE 11 TITLE POSADA, VIVIAN 12 NAME STREET ADDRESS 8305 S.W. 103RD STREET 1.3 STREET ADDRESS
8305 S.W. 103RD STREET MIAMI FL 82 Street Address (P.O. Box Number is Not Acceptable) 84 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, for 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 SIgnature, typed or peaced accept of tagent and the flagshische (Not Flagstered Agent signature required when reinstating) DATE 12. OFFICENS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D DELETE 11 TITLE Change Addition NAME POSADA, VIVIAN 1.2 NAME STREET ADDRESS 8305 S.W. 103RD STREET 1.3 STREET ADDRESS
MIAMI FL 83 84 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, typed or printed remove of tray of statement of tray of statement do they are statement for the purpose of changing its registered agent statement. I am familiar with, and accept the appointment as registered Agent squalure required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE 11 TITLE 12 Change Addition 13 STREET ADDRESS 13 STREET ADDRESS 14 STREET ADDRESS
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NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

indicated on this armost 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 a 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 all attachment with an address.

SIGNATURE-

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