FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** FLORIDA DEPARTMENT OF STATE Jan 23 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # L81898 (3)ERLK CO. Principal Place of Business Mailing Address 10102 SW 23 ST. 10102 SW 23 ST. MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/20/1990 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name EHRLICH, HARRY 10102 SW 23 ST. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33165** 83 84 City 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 name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1,1 TITLE Change Addition EHRLICH, HARRY NAME 1.2 NAME 10102 SW 23 ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP 1.4 CiTY - ST - ZiP TIT) F DELETE DVP 2.1 TITLE ☐ Change Addition EHRLICH, ELENA NAME 2.2 NAME 10102 SW 23 ST. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE 3.1 TITLE Channe Addition EHRLICH, PATRICIA NAME 3.2 NAME 10102 SW 23 ST. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP 3.4. CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition EHRLICH, JAMES E NAME 4. 2 NAME 10102 SW 23 ST. STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5,4 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME

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.

**6.3 STREET ADDRESS** 

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

552-8776 01-14-98

**72E034**