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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L82458

(5)

Mailing Address

J. MICHAEL FITZGERALD, P.A.

FILED Aug 26 1998 8:00am Secretary of State



2665 SQ. BAYSHORE DR. 2665 SQ. BAYSHORE DR. SUITE M-103 SUITE M-103 MIAMI FL 33133 MIAMI FL 33133			DO NOT WRITE IN THIS	S PACE		
				 Date Incorporated or Qualified 06/22/1990 		
2. Principal Pl	age of Business	2a. Mailing Address	A / 1	4. FEI Number	Applied For	
21 //0 /	MERRICK Way	28. Mailing Address 26 // // // // // Suite, Apt. #, etc.	RICK WA	65-0212907	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		- 0 - 1	\$8.75 Additional	
22	_	27		5. Certificate of Status Desired	Fee Required	
City & State	1 / //25 1/	28 () (a (6 a)	6/85 FC	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
zip 24 33/		zig 33/34 30	Country A	 This corporation owes or has paid the cu Personal Property Tax due June 30. 	rrent year Intangible □ Yes □ No	
g, Name and Address of Current Registered Agent				10. Name and Address of New Registered	10. Name and Address of New Registered Agent	
FITZQERALD, J. MICHAEL ESQUIRE 81 Name 7 M				1 Michael FITZG	e Call	
COSE OD DAVOHODE DE				<u> </u>		
SUITE M-103				Address (R.O. Box Number is Not Acceptable)		
MIA	MI FL 33133		63 ′ ′	, , , , , , , , , , , , , , , , , , , ,		
			84 City,	C / / //cs ==	85 Zip Code	
	10-4			Con/G-ab/PS FL	. 1 133739 1	
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. Systed or prested name of registered agent and little if applicable. (NOTE Registered Agent agent and experience agent and little if applicable. (NOTE Registered Agent age						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 12	
TITLE	PSD	DEFETE	1.1 TITLE	PSD 11 = M. 1	☑ Change ☐ Addition	
NAME	FITZGERALD, J. MICHAEL		1.2 NAME	Fitzgerald JiMicha	p (
STREET ADDRESS	2665 SO BAYSHORE DR.		1.3 STREET ADDRESS		<i>y</i>	
CITY-ST-ZIP	MIAMI FL 33133		1.4 CiTY - S1 - ZiP	Cocal Gas/es, F/3	3134	
TITLE		DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CITY-\$1-ZIP			
TITLE		☐ DELETE	41 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELFTE	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	
NAME		-	6.2 NAME			
STREET ADDRESS						
			6.3 STREET ADDRESS			
CITY-ST-ZIP	artify that the information supplied with	this files does not qualify for th	6.4 CITY-ST-ZIP	d in Section 110 07/2Vi). Florida Statutos, Librathor or	india . Ab A str	

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.