


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

**FILED**  
**Apr 17 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # L89653 (4)**

1. Corporation Name  
**BASE INTERNATIONAL, INC.**



Principal Place of Business <del>3000 RIVINGTON AVE</del> <del>MIAMI BEACH</del> <del>MIAMI BEACH</del>	Mailing Address <del>3000 RIVINGTON AVE</del> <del>MIAMI BEACH</del> <del>MIAMI BEACH</del>
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 <b>4675 Ponce de Leon Blvd.</b>	26 <b>4675 Ponce de Leon Blvd.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <b>Suite 305</b>	27 <b>Suite 305</b>
City & State	City & State
23 <b>Coral Gables, FL 33146</b>	28 <b>Coral Gables, Florida 33146</b>
Zip Country	Zip Country
24 <b>U.S.A.</b>	30 <b>U.S.A.</b>

3. Date Incorporated or Qualified <b>06/28/1990</b>	
4. FEI Number <b>65-0213792</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CLAUSSEN, KENNETH F.**  
**701 BRICKELL AVE**  
**16TH FLOOR**  
**MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable) <b>4675 Ponce de Leon Blvd.</b>	
83 <b>Suite 305</b>	
84 City <b>Coral Gables</b>	85 Zip Code <b>FL 33146</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>ELIAS LANDSBERGER GLIK</b>	
STREET ADDRESS	<b>701 BRICKELL AVE 16TH FL</b>	
CITY-ST-ZIP	<b>MIAMI FL 33131</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>ALFREDO LANDSBERGER GLIK</b>	
STREET ADDRESS	<b>701 BRICKELL AVE 16TH FL</b>	
CITY-ST-ZIP	<b>MIAMI FL 33131</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>4675 Ponce de Leon Blvd., Ste 305</b>
1.4 CITY-ST-ZIP	<b>Coral Gables, FL 33146</b>
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>4675 Ponce de Leon Blvd., Ste 305</b>
2.4 CITY-ST-ZIP	<b>Coral Gables, FL 33146</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 a 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.

SIGNATURE \_\_\_\_\_ **ELIAS LANDSBERGER GLIK** \_\_\_\_\_ **MIAMI BEACH 1998**

CF2E034 (10/97)