


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED
AND
FILED

1999 JUL 19 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # M42156		
1. Corporation Name DANIEL MICHAEL CORPORATION		

Principal Place of Business ASHER INSURANCE GROUP 7902 NORTHWEST 36 STREET, SUITE 203 MIAMI FL 33166 US	Mailing Address ASHER INSURANCE GROUP 7902 NORTHWEST 36 STREET, SUITE 203 MIAMI FL 33166 US
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2. Principal Place of Business 21 1541 BRICKELL AVENUE Suite, Apt. #, etc. 22 APT 2605 City & State 23 MIAMI, FLORIDA Zip 24 33129	2a. Mailing Address 26 1541 BRICKELL AVENUE Suite, Apt. #, etc. 27 APT 2605 City & State 28 MIAMI, FLORIDA Zip 29 33129 Country 30 USA
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9. Name and Address of Current Registered Agent MALAND, ROBERT C. ONE DATRAN CENTER, SUITE 1409 9100 S DADELAND BLVD MIAMI FL 33156	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City
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DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified 11/24/1986	
4. FEI Number 59-2746918	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHER, JAMES G.	1.2 NAME	
STREET ADDRESS	7902 NORTHWEST 36 STREET, SUITE 203	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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.

SIGNATURE:  7/13/99 AD

Pg 2

Asher Group

the asher insurance group, inc.

July 12, 1999

Mr. Andy Dunlap
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO Box 6327
Tallahassee, FL 32314

RE: Annual Reports

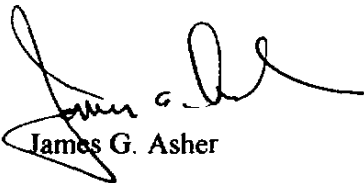
Dear Mr. Dunlap:

Kindly be advised that we have not been in receipt of the following Annual Corporate Report for the following companies:

1. Port Malibar Properties, Inc.
2. Red Jaguar Corporation
3. Garden Properties, Inc.
4. Ft. Myers Properties, Inc.
5. Daniel Michael Corporation

I have experienced two recent operations as well as a change in secretaries and as a result have not received the report packet.

Please be so kind as to waive the penalty on the above referenced corporations. Thanking you in advance,



James G. Asher