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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

M51191

(8)

FIRST A	avenue south propert	TES CORP.					
Principal Place	e of Business	Mailing Address			- I (BETOEN) (A) BINGS HERD SEIDT II	JO! BIGIL BIGIL DIGIT GIGIT G	/
1320 S. DIXIE		1320 S. DIXIE HWY.					
STE. 940 STE. 940							
CORAL GABLES FL 33146		CORAL GABLES FL 33146			DO NOT WRITE IN THIS SPACE		
US		U\$	US		3. Date Incorporated or Qualified		
Determined Disease of Duraineses		2a. Mailing Address			04/29/1987 4. FEI Number		Analised Fine
2. Principal Place of Business		— °			59-2799922	 	Applied For Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc			\$0.75	5 Additional	
22		— — · · · ·	27		5. Certificate of Status Desired		Required
City & State		City & State		6. Election Campaign Financing		May Be	
23		28			Trust Fund Contribution		ed to Fees
Zip Country		Zip Country			8. This corporation owes or has paid the current year Intangible		
24 25 29			30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
	rskowitz, Bernard		81	Name			
1320 S.DIXIE HWY.,STE.940			82	82 Street Address (P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33131			83	 		·	
				3		leal 7	
			84	City		FL 85 Z	p Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was	s authorized by	the corporation	oration submits this statement for the pon's board of directors. I hereby accept	nurnose of changing	j its registered as registered
SIGNATURE	Signature, typed or printed name of registered ag-	over and tallo if are an algorithm.	Off Registered Agen	at singapire require	on when reinstation)	DATE	
12. OFFICERS AND DIRECTORS			13.	It Signature respons	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE			11 TITLE			☐ Change	
NAME	HERSKOWITZ, BERNARD		1.2 NAME				
STREET ADDRESS	1320 S. DIXIE HWY. #940		1.3 STREET A	ADORESS			
CITY-ST-ZIP	CORAL GABLES FL 1,4		1,4 CITY - ST	- ZIP			
TITLE			2 1 TITLE			☐ Change	e Addition
NAME	HERSKOWITZ, JEROME		2.2 NAME				
STREET ADDRESS	1320 S. DIXIE HWY. #940		2 3 STREET A	ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL		2. 4 CITY - ST	r - zip			
TITLE		☐ DELETE	3 1 TITLE			☐ Change	e 🔲 Addition
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREET A	ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST	Γ- ZIP			
TITLE		DELETE	4.1 TITLE			[_] Change	e L Addition
NAME			4. 2 NAME				
STREET ADDRESS			4 3 STREET A	ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST	· ZIP			
TITLE		DELETE	5 1 TITLE			☐ Chang	e L Addition
NAME			5 2 NAME				
STREET ADDRESS			5.3 STREET A	ADDRESS			
CITY-ST-ZIP			5 4 CITY · ST	· ZIP			
TALE		☐ DELETE	6.1 TITLE			Li Chang	e L Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET A	ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		6 4 CITY - ST				
14. I hereby co	certify that the information supplied w	vith this filing does not qualify at annual report is true and ac	for the exempti	ion A ated in S it n iv signatur	Section 119.07(3)(i), Florida Statutes. I e shall have the same legal effect as i	i further certify that ti if made under oath.	he information that I am an
officer or o Block 12 c	director of the corporation or the record Block 13 inchanged, or on an atta	eiver or trustee ampowered to achment with an address	o execute this r	e as requi	e shall have the same legal effect as i ired by Chapter 607, Florida Statutes;	and that my name a	appears in

APR 27 1998 (305) 663-1491

FILED

May 15 1998 8:00am

Secretary of State