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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MEN # IVI34270 H H. KANTER PRODUCTION	` '			Badas d adės bidės abda
Principal Place of Business		Mailing Address		a landidir idi assis alata sidir senat sati aldir dinit mani i	bilin diancatant nadi
C/O JOSEPH H. KANTER		7759 MONTGOMERY ROAD			
MIAMI FL 33137		3 Cinannati oh 45236		DO NOT WRITE IN THIS SPACE	
- ka 40		U\$		3. Date Incorporated or Qualified	
~4440				06/22/1987	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 H740		26		59-2825289	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		I & L'entitionte di Status Hesired I I .	8.75 Additional Fee Required
22 1\50 City & State		City & State			
23	-	28]			5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current y	
24	25		0	Personal Property Tax due June 30.	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agen	t
KANTER, JOSEPH H.			81 Name		
3550 BISCAYNE BLVD #504			82 Street Add	Iress (P. 200x Number is Not Acceptable)	
MIAMI FL 33137			83 47-	to lociocagnic regiva	
			<u> </u>	uite 1150	
			84 City	FL 85	Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-na				poration submits this statement for the purpose of char	nging 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					l
Signature, typed or printed name of registered agent			Registered Agent signature requi	alred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIR	FOTODO IN 10
12.	OFFICERS AND	DELETE	13.		Change Addition
NAME	KANTER, JOSEPH H.	Steen	1.2 NAME	<u> </u>	mange radicati
STREET ADDRESS	3550 BISCAYNE BLVD #504		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 City - St - ZiP		
TITLE	VID	DELETE	2.1 TITLE		Change
NAME	KANTER, NANCY R.		2.2 NAME		
STREET ADDRESS	3550 BISCAYNE BLVD #504		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·
TITLE	SD KANTER, JOHN E(RECORDING	☐ DELETE 2	3.1 TITLE		Change
NAME	3550 BISCAYNE BLVD #504	,	3.2 NAME		İ
STREET ADDRESS	MIAMI FL		3.3 STREET ADDRESS		
CITY+ST-ZIP TITLE	D	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	По	change Addition
NAME	PRICE, HAROLD	- vere	4, 2 NAME		
STREET ADDRESS	3550 BISCAYNE BLVD #504		4.3 STREET ADDRESS		
CITY-ST-ZIP	Miami Fl		4.4 CITY - ST - ZIP		
TITLE	0	☐ DELETE	5.1 TITLE		Change
NAME	SOLOMON, LAWRENCE		5.2 NAME		
STREET ADDRESS	3550 BISCAYNE BLVD #504		5.3 STHEET ADDRESS		
	MIAMI FI		II		į.

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 only in altraphment with an address.

6.1 TITLE

6.2 NAME

6.3 STREFT ADDRESS

TITLE

NAME

STREET ADDRESS

DELETE

FILED

Apr 24 1998 8:00am

Secretary of State

Addition