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

| DOCUMENT # M55205 (2) FRIEDMAN & RODMAN, P.A. | | | | | |
|---|--|----------------------------|------------------------------------|---|------------------------------------|
| Principal Place | e of Business | Mailing Address | | | hidhi dhaki didir yoddi didis redi |
| 3636 WEST FLAGLER STREET 3636 WEST FLAGLER ST | | TREET | | | |
| MIAMI FL 33135-1030 MIAMI FL 33135-1030 | | | | DO NOT WRITE IN TH | IIS SPACE |
| | | | | 3. Date Incorporated or Qualified | |
| | | | | 07/08/1987 | |
| | , Principal Place of Business 2a, Mailing Address | | | 4. FEI Number | Applied For |
| 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. | | | 59-2816886 | Not Applicable \$8.75 Additional | |
| 22 | ¬ | | | 5. Certificate of Status Desired | Fee Required |
| City & State City & State | | · | 6, Election Campaign Financing | \$5.00 May Be | |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | 7 φ | Country | 8. This corporation owes or has paid the | |
| 24 | [25] | [29] | 30 | Personal Property Tax due June 30. | U Yes □ No |
| | 9. Name and Address of Current | Registered Agent | 81 Name | 10. Name and Address of New Register | an Agaur |
| | EDMAN, HARVEY D. | | | | |
| 3636 WEST FLAGLER ST. MIAMI FL 33135 | | | 82 Street Ad | dress (P.O. Box Number is Not Acceptable) | |
| mir | um r c 00100 | | 63 | | |
| | | | 64 City | | lan Zin Codo |
| | | | | | Zip Code |
| 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, typed or profed name at regelered agent | and life if anotopide. (NC |)][Registered Agent signature req | puired when reinstating) DAT | F |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS/CHANGES TO OFFICERS | |
| TITLE | D | DELETE | 1,1 TITLE | | Change Addition |
| NAME | FRIEDMAN, HARVEY D. | | 1.2 NAME | | |
| STREET ADDRESS | 3636 W. FLAGLER ST. | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 21 TITLE | | Change Addition |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELETE | 2. 4 City-St-ZiP 3.1 Title | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | | _ • - |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 34 CITY-ST-ZIP | | |
| TITLE | , | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | T DELETE | 4.4 CiTY-ST-ZIP | | Change Addition |
| TITLE | | DELETE | 51 THILE | | Therefore The Vontion |
| NAME CIDEET ADDOCCC | | | 5.2 NAME 5.3 STHEET ADDRESS | | |
| STREET ADDRESS | | | 5.4 City-St-Zip | | |
| CITY-ST-ZIP TITLE | | DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | _ | 6.2 NAME | | |
| STREET ADORESS | | | 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 suppliemental 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 aspears in Block 12 or Block 13 if hangoid, or on an attrachment with an address.

SIGNATURE: Stanoul (1) Med Mad

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FILED

Feb 27 1998 8:00am

Secretary of State