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 #

CITY-ST-ZIP

M65130

(0)

EARTHSCAPE DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address											
% MAX WOLFE STURMAN 3300 RICE ST., #11 COCONUT GROVE FL 33133				C/O CAROLYN B MEREDITH 967 HILLSBORO MILE HILLSBORO BCH FL 33062			DO NOT WRITE IN THIS SPACE				
				US			Date Incorporated or Qualified 01/19/1988				
2.	Principal Place of Busin	noss	2a.	, Mailing Addre	SS	4.	FEI Number		Applied For		
21]		26				NOT APPLICABLE		Not Applicable		
22	Suite, Apt. #, etc.	27	Suile, Apt. #, etc.			Certificate of Status Desired		\$8.75 Additional Fee Required			
23	City & State	28	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
	Zip	Country		Zip	Country	8.	This corporation owes or has p	aid the cu	current year Inlangible		

Personal Property Tax due June 30. Yes 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STURMAN, MAX WOLFE 3300 RICE ST. 82 Street Address (P.O. Box Number is Not Acceptable) NO. 11 83 **COCONUT GROVE FL 33133** 84 City

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 (N()) E: Registered Agent signature required when reinstating) Signature, typed or prested name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change 1.1 TITLE TITLE MEREDITH, CAROLYN B. NAME 1.2 NAME 967 HILLSBORO MILE 1.3 STREET ADDRESS STREET ADDRESS HILLSBORO BEACH FL 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Addition Change TITLE D 2.1 HTLE STURMAN, MAX WOLFE NAME 3300 RICE ST., #11 STREET ADDRESS 2.3 STREET ADDRESS **COCONUT GROVE FL** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition 3.1 THLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 5.1301£ NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP DELFTE 6.1 TITLE ___ Change Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Horeby certify that the information supplied with this filing does not qualify of 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.

6.4 CITY - ST - ZIP

FILED

Jan 20 1998 8:00am

Secretary of State