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

n this annual report or supplemental annual report is true and extern of the corporation or the receiver or trustee empowered allock 13 if chapped, or on an attachment with an address

SIGNATURE:

May 07 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # M72066 (7)A.G.P. DEVELOPMENT. INC. Principal Place of Business Mailing Address 11790 SW 89 ST 11790 SW 89 ST MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/14/1988 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0035532 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 X Yes 29 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREENBERG, JEFFREY M. 11790 SW 89 ST 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33186-9166 **B3** 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 printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 TITLE ☐ Change GREENBERG, JEFFREY M. NAME 1.2 NAME CR2E034 14850 SW 167 ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI_FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE 2.1 TITLE Addition ALBRIGHT, JOHN 2.2 NAME 4703 RIVIERA DRIVE 17420 SW 73 COURT STREET ADDRESS 2.3 STREET ADORESS CORAL GABLES, FL. 33146 MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition PALMER, YVETTE NAME 3.2 NAME 10341 S.W. 102 AVENUE STREET ADDRESS 3.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP TITLE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRES 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

y for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under eath, that I am an to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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