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

PROFIT CORPORATION **ANNUAL REPORT**

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M84093 MANAGEMENT HOLDING COMPANY

(7)

FILED May 15 1998 8:00am Secretary of State

				T 18 B		
Principal Place of Business Mailing Address				- I IN A MARTIN WELL FROM A MINING ARMAD THAT BY BATT		
3250 MARY ST MIAMI FL 33133 US		3250 MARY STREET STE 500 MIAMI FL 33133		DO NOT WRITE IN THIS SPACE		
		US		3. Date Incorporated or Qualified 06/02/1988		
2. Principal P	Place of Business	2a. Mailing Address			lied For	
21		26		1	Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Ad	ditional	
22		27		Fee Requ	uired	
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 M		
23 Z _{IP}	Country	7 _{(P}	Country	Trust Fund Contribution Added to		
24	25	29	30	8. This corporation owes or has paid the current year Intan Personal Property Tax due June 30.	•	
	9. Name and Address of Curre		[30]	10. Name and Address of New Registered Agent	140	
PE	LTZ, ARVIN		81 Name			
	50 MARY STREET, STE 500		82 Street Add	dress (P.O. Box Number is Not Acceptable)		
ML	AMI FL 33133			Total (10. Dox Hamber to Not Notablidate)		
			83			
			84 City	■■ 85 Zip Co	ode	
44 67 7						
office or r	to the provisions of Sections 607 05 legistered agent, or both, in the Stat	502 and 607.1508, Florida Statut te of Florida: Such change was:	tos, the above-named corp authorized by the corpora	poration submits this statement for the purpose of changing its ration's board of directors. I hereby accept the appointment as re	registered eaistered	
	m familiar with and accept the obli	gations of, Section 607.0505, Fi	orida Statutes		•	
SIGNATURE	Sharatore, typed or protect name of registered a	oent and little if an one able (NO)	E: Registered Agent signature requi	ared when reinstating) DATE		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
TITLE	DCP	DELETE	1 1 TITLE		Addition	
NAME	Weiser, Sherwood		12 NAME			
STREET ADDRESS	3250 MARY ST		13 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	···	14 CHTY-ST-ZIP			
TITLE	VPAS	☐ DELETE	2 1 TITLE	[] Change	☐ Addition	
NAME	LEFTON, DONALD E		2 2 NAME			
STREET ADDRESS	3250 MARY ST		2 3 STREET ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL VPST	DELETE	2. 4 City - ST - ZiP 3.1 Title	Change	Addition	
NAME	TEMLING, W PETER	otten	3.2 NAME	Change [Mudition	
STREET ADDRESS	3250 MARY ST		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP			
TITLE	VP	☐ DELETE	4.1 TITLE	☐ Change	Addition	
NAME	SIBLEY, PETER L		4. 2 NAME			
STREET ADDRESS	3250 MIAMI ST		4 3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	· · · · · · · · · · · · · · · · · · ·	4 4 CITY-ST-ZIP			
TITLE	VP	☐ DELETE	5 1 TITLE	☐ Change [Addition	
NAME	HEWITT, THOMAS F		5.2 NAME			
STREET ADDRESS	3250 MARY STREET MIAMI FL		5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	MINNI FL	☐ DELETE	5 4 CITY-ST-ZIP	Change [Addition	
NAME		L_I OLLUL	6.1 HILLE	Glasge	ANDIONII	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6 4 CITY - ST - ZIP			
14. I hereby c	ertily that the information supplied of	with this filing does not qualify for	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the inf	formation	
officer or o	On this annual report of supplement	tal annual roport is true and acc Seiver or trustee empowered to	turate and that my signatu	are shall have the same legal effect as if made under oath; that I uired by Chapter 607, Florida Statutes; and that my name appearance.	lam an I	