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**

P92000001559 (3)

FILED Feb 11 1998 8:00am Secretary of State

MSW H	EALTY, INC.							
Principal Plac	e of Business	Mailing Address				i indistrat bin salin tents Abtit notit antit Abtit	EBIGI ILDĞI ELLƏY D	####
6126 S.W. 152ND ST. MIAMI BEAUTY FL 33157		6126 S.W. 152ND ST. MIAMI DENEM FL 33157			DO NOT WRITE IN TH	IIS SPACE		
					3	- Date Incorporated or Qualified		
						11/03/1992		
2. Principal P	lace of Business	2a. Mailing Address	- Mailing Address			FEI Number	Applied For	
21		26				65-0366678	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6	Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution			
	_ ·		Zip Country		8	8. This corporation owes or has paid the current year Intangible		
24	9. Name and Address of Curre	29	30			Personal Property Tax due June 30. Name and Address of New Register		∐ No
		ut Haðistelan Yðaut		81 Name		- Name and Address of New Register	o Agent	
WA		OI IVaille						
6128 SW 152ND ST				82 Street A	Address (f	P.O. Box Number is Not Acceptable)		
MIAMI FL 33157				83				
			i	84 City			85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	12 and 607 1508 Florida Statu	tes the e	nove-named (corporatio	on submits this statement for the purpose		its registered
office or r	egistered agent, or both, in the State	of Florida, Such change was	authoriza	d by the corp	poration's	board of directors. I hereby accept the	appointment as	s registered
_	m familiar with, and accept the oblig	ations of, Section 607.0505, Fi	orida Stat	ules.				Í
SIGNATURE	Signature, typed or printed name of registered ag-	ent and little if applicable (NO)	E Registere	Ageni signature r	required when	p reinstating) DAT	<u> </u>	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
TITLE	D	☐ DELETE	1.1 Tr	ILE			Change	Addition
NAME	WATSON, H S		1.2 N	IME	Ì			וֹ
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NAME		عربيون ني	6.2 NA				_ 0,2,19	adding)
STREET ADDRESS			1	REET ADDRESS				j
CITY-ST-ZIP				Y-ST-ZIP				
	ertify that the information supplied w	ith this filing does not qualify for			d in Section	on 119.07(3)(i), Florida Statutes. I further	cortify that the	e 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.

SIGNATURE:

305-2S6 - JIII