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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 16 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000009952 (2)

**EQUITY ONE (ALPHA) CORP.** 

Odes - Description					1 400 (1604 110 120 (18 110) 100 (18 110) 100 (18 110) 100 (18 110) 100 (18 110) 100 (18 110) 100 (18 110)	
Principal Place of Business Mailing Address						
777 17TH ST.		777 17TH ST. PENTHOUSE SUITE				
MIAMI BEACH FL 33139		MIAMI BEACH FL 33139			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 12/04/1992
Principal Place of Business     1		2a. Mailing Address 26				4. FEI Number Applied For
						65-0437659 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	28 Zip	Cou	untry	<del></del>	Trust Fund Contribution
24	25	29	30	ui iti y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
2-7	9. Name and Address of Curre			T	···	10. Name and Address of New Registered Agent
KA*	TZMAN, CHAIM			81	Name	
	177H ST			82	Street Adr	dress (P.O. Box Number is Not Acceptable)
PENTHOUSE SUITE					Sheet Add	Gress (1. O. Box Normber is Not Acceptable)
MIAMI FL 33131				83		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	lutes, the a	pove	e-named cor	rporation 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 as			o Age	ent signature requ	uired when reinstaling) DATE
12.		ND DIRECTORS	13.		—————	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD OLIANA MATZMANI	☐ DELETE	11 T			☐ Change ☐ Addition
NAME	CHAIM KATZMAN 777 - STREET PH		12 N			
STREET ADORESS	MIAMI BCH., FL 33139		4		ADDRESS	
CITY-ST-ZIP TITLE	VP	DELETE	2.1 T		iT-ZIP	Change Addition
NAME	DORON VALERO		2.2 N		1	
STREET ADORESS	777 17TH ST.				ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33139		2. 4 CITY-ST-ZIP		ſ	
TITLE				3.1 TITLE		Change Addition
NAME			3.2 N	AME		
STREET ADDRESS			3.3 S	TREET	ADDRESS	
CITY-\$T-ZIP	Y-\$T-ZIP		3.4. CITY-S1-ZIP		ST-ZIP	
TITLE	DELETE 4:		4.1 T	ITLE		Change Addition
NAME			4.21	AME	- 1	
STREET ADDRESS			4.3 S	TREE1	ADDRESS	
CITY-ST-ZIP			4.4 C	tty-s	T - ZIP	
TITLE		DELETE	51 T	TLE	J	Change Addition
NAME			52 N	AME	- 1	
STREET ADDRESS			53 S	TREET	ADDRESS	
CITY-ST-ZIP		T objects			T-ZIP	
TITLE		☐ DEL <b>e</b> te	6.1 TI			Change Addition
NAME		•	6.2 N		1	
STREET ADDRESS	Λ	$\Lambda$	. I		ADDRESS	
CITY-ST-ZIP	ertify that the information supplied s	with this little does not existing			II-ZIP	n Section 119.07(3)(i), Florida Statutes, I further certify that the information
indicated officer or of	on this annual report or supplement director of the cyrphration or the rec	wan this filling does not qualify tal printial report is true and a centerfor trustee empowered t achinent with an address.	courate an	d tha this	at my signati report as rec	ure shall have the same legal effect as if made under oath; that I am an quired by Chapter 607, Florida Statutes; and that my name appears in