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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 02 1998 8:00am Secretary of State

	1990	The Committee of the Co		⊣	
DOCU 1. Corporation	MENT # P9300	00002853 (8)	•		
TO GO POLICE	OCAST HOLDINGS, INC.	` '			
DIIQAI	JONOT HOLDINGS, ING.			A DRAHIMAL AND ARRIVE MAINT MAINT MAINT ARRIVE FROM	A A LET CHA E I SĂ LA R A LEA B SALE A A A R
Principal Plac	ce of Business	Mailing Address			Amin liddt stidt ætick till imm
9950 S. DIXIE HWY.		8350 S. DIXIE HWY.			
SUITE 900 Miami Fl 33	156	SUITE 900 MIAMI FL 33156		DO NOT WRITE IN THIS SPACE	
Minimi I E Go	··•	wirtin 12 00100		3. Date Incorporated or Qualified	
				01/13/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# otc	Suite, Apt #, etc.		65-0384108	Not Applicable
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		[28]	J	Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ [11]	Country	8. This corporation owes or has paid the	
24	[25] 9. Name and Address of Curr	29 ent Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
Ð	JCK, ROBERT J		81 Name		<u> </u>
	150 S. DIXIE HWY.		82 Street Add	iress (P.O. Box Number is Not Acceptable)	
SUITE 900				areas (1.6. box remiser to reconstruct)	
M	AMI FL 33156	•	83		
			84 City		85 Zip Code
44 0	h. M	COO and COT 1000 Florido Cod.	doe the shows person on		L as zip code
office or	registered agent, or both, in the Sti	ite of Florida, Such change was	authorized by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the a	appointment as registered
	am familiar with, and accept the obl	идавоня он, весной вохоров, г	iorida Statutes.		
SIGNATURE	Signature Typed or pended has a of registered.	ngartaen: blic l'agadisable (NO	It. Registered Agent signature requ		
12.	,, ,	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME	DP Blank, Mark	[_] DELETE	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	9350 S. DIXIE HWY., SUITE	900	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	. 000	1.4 CITY-ST-ZIP		
TITLE	VP	DELETE	21 TITLE		Change Addition
NAME	BLANK, TONY		22 NAME		
STREET ADDRESS	9350 S DIXIE HWY STE 900	0	2 3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL		2 4 CITY - ST - ZIP	<u> </u>	The state of the s
TITLE	DEVP	DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS	BLANK, ANDREW 9350 S. DIXIE HWY., SUITE	900	3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP		Ì
TITLE	ST	DECETE	4.1 TITLE		Change Addition
NAME	PUCK, ROBERT J		4. 2 NAME		
STREET ADORESS	9350 S DIXIE HWY STE 90	0	4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	D 651.577	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	1	DELETE	51 TITLE 52 NAME		LI CHARGE LI AUGILION
NAME STREET ADDRESS			5.3 STREET ADDRESS		ĺ
CITY-ST-ZIP			5.4 City-St-ZiP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	· ·		6.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CITY-ST-ZIP		
14. Thereby	certify that the information supplied	with this filing does not qualify.	tor the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further	certify that the information

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supply mental 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 conjugation only of the conjugation of

SIGNATURE:

2-23-98

305-670-2277