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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000003430 (4) DOCUMENT

FEDERAL INVESTMENT CORPORATION

Principal Place of Business Mailing Address 3600 S STATE RD 441 3600 S STATE RD 441 DO NOT WRITE IN THIS SPACE MIRAMAR FL 33023 MIRAMAR FL 33023 US 3. Date Incorporated or Qualified 01/11/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0392667 X Not Applicable 26 6151 MIRAMAR PARKWAY 6151 MIRAMAR PARKWAY Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 201 201 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 MIRAMAR 28 MIRAMAR Trust Fund Contribution Country Country 8. This corporation owes or has paid the current year Intangible Zip Zip X No 25 BROWARD 29 33023
9. Name and Address of Current Registered Agent Yes Yes 30 BROWARD Personal Property Tax due June 30. 3302 24 10. Name and Address of New Registered Agent 81 MARTINEZ, JOSIAS JOSIA MARTINEZ 210 SE 9TH STREET Street Address (P.O. Box Number is Not Acceptable) 6151 MIRAMAR PARKWAY HALLANDALE FL 33009 83 SUITE #201 City 84 Zip Code 33023 MIRAMAR 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 Eprida. 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 SIGNATURE (NOTE, Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. X Change ___ Addition DELETE 11 TM F TITLE ROSA GONZALEZ GONZALEZ, ROSA 1.2 NAME NAME 6151 MIRAMAR PARKWAY SUITE #201 1100 NE 125 STREET #201 STREET ADDRESS 1.3 STREET ADDRESS N. MIAMI FL 33161 MIRAMAR, FL. 33023 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 2.1 TITLE ☐ Change Addition TITEE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY - ST- ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Change ____ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP

SIGNATURE:

Block 12 or Block 13 if changed, or on an attachment with an address.

14. I hereby 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 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

FILED

Feb 05 1998 8:00am

Secretary of State