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

	MENT # P9300 NEE INVESTMENTS, INC.	0021161 (3)		
Principal Place of Business Mailing Address				
% AKERMAN SENTERFILT ONE SE 3RD AVENUE #2800 MIAMI FL 33131 US		* AKERMAN SENTERFILT ONE SE 3RD AVENUE #2900 MIAMI FL 33131 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/22/1993
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0398699 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		SR 75 Additional
22		27	-,	Certificate of Status Desired Fee Required
City & Stat	6	City & State		6. Election Campaign Financing \$5.00 May Be
23	Country	28 7in	Country	Trust Fund Contribution Added to Fees
Zip 24	Country	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☑ No
241	g, Name and Address of Curre		[30]	10. Name and Address of New Registered Agent
RAATTAMA, HENRY H JR % AKERMAN SENTERFILT & EIDSON ONE SE 3RD AVENUE 28TH FLOOR MIAMI FL 33131 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ai office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Stat				t Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code
agent. I a SIGNATURE	Signature, typed or printed name of registered ag	pent and title if applicable (NO	TE Registered Agent signatur	
12.		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIFLE	D Warren, Richard	(TA DESERTE	1.1 TITLE	WARREN, RICHARD Change Maddition 2665 S. BAYSHORE DR. South 202
NAME	9350 S DIXIE HWY SUITE	000	1.2 NAME	Offer S. RANSHORE DR. Suite vor
STREET ADORESS	MIAMI FL 33158	500		COCONUT GROVE FLA. 33/33
CITY-ST-ZIP TITLE	MICHITE SS150	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY - ST - ZIP			2. 4 CITY - ST - ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	•
STREET ADDRESS			4.3 STREET ADDRESS	
City-St-ZiP		D DELETE	4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	,
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	Change Addition
NAME			6.2 NAME	Orango C Addition
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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 supplied ental ground 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 of the receiver or true ee 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, of on an attachment with an address.

SIGNATURE:

4/7/58

30V-854-1440

FILED

Apr 16 1998 8:00am

Secretary of State