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

DOCUMENT # P93000030231 (3)

FIRST FINANCIAL OF SOUTH FLORIDA, INC.

FILED Jan 27 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		T EBRYOUX ITA IMIKA KIRKI DANYA KAJIT BANYI DANKA HAITI MANYA (IBRU PYAN) ITAH DAK	
20197 N.E. 16TH PLACE 20197 N.E. 16TH PLACE					
MIAMI FL 331		MIAMI FL 33179			
İ				DO NOT WRITE IN THIS SPACE	_
				3. Date Incorporated or Qualified 04/26/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For	ヿ
21 125	57 S. YIM Island	28 5510	2	65-0410379 Not Applicable	-
Suite, Apt. #, etc. Suite, Apt. #, etc.				S8 75 Additional	٦
22 27			5. Certificate of Status Desired Fee Required	╝	
City & State City & State 23 City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	i
Zip 24 3330	Country US A	Zip 29 3	Country	8. This corporation cwes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	7
241 2230	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Registered Agent	-
OLINION COOTT					
Oblition, Scott				Dlinick, Scott	4
N. MIAMI BEACH FL 33180			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
1			83	A 45. 0	\dashv
ĺ				7	_
			84 City	Plantation, PL FL 85 Zip Code	1
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statutes	, the above-named corp		\dashv
office or re	egistered agent, or both in the State	ent-Horida, Such change was aut	thorized by the corporati	oration submits this statement for the purpose of changing its registered iton's board of directors. I hereby accept the appointment as registered	
	in landing with the design	Satt Olinia	1 11Pmil	1 1/2/98	
SIGNATURE	Signature, typed or printed hame of registered as		Registered Agent signature require	red when reinstating) DATE	1
12,	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12] §
TITLE	Р	☐ DELETE	1,1 TITLE	Change Addition	1
NAME	OLINICK, KERRI		1.2 NAME		5
STREET ADDRESS	1257 S. PINE ISLAND RD		1.3 STREET ADDRESS		្រ
City-St-ZiP	PLANTATION FL 33324		1.4 CITY-ST-ZIP		
TITLE	VP	DELETE	2.1 TITLE	Change L Addition	، اد
NAME	OLINICK, SCOTT		2.2 NAME		
STREET ADDRESS	1257 S. PINE ISLAND RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33324		2. 4 CITY - ST - ZIP		4
TITLE		DELETE	3.1 TITLE	L Change L Addition	1
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		- Delett	3.4. CITY - ST - ZIP	L Chance L Addition	4
TITLE		L DELETE	4,1 TITLE	Change Addition	1
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		☐ DELETE	4.4 CITY - ST - ZIP	Change Addition	4
TITLE		☐ DELETE	5.1 TITLE	Gladge Adduton	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP	Change Addition	\dashv
TITLE		L DELEIC	6.1 TITLE	in change in Audition	1
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	partifu that the information cumuliaria	with this filing does not qualify for	6.4 CITY-ST-ZIP	Section 119 07(3)(i) Florida Statutes I further certify that the information	\dashv
indicated	on this appual report or supplied to	tal approal record for the and accur	ate and that my cionatu	Section 119.07(3)(i), Florida Statutes. I further certify that the information	-

14. I hereby certify that the information supplied with this filing close 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 five 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 of trustee amounted 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 far affectment with an address.

SIGNATURE:

EIGNATURE REQUIRED

1/2/58
