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 # P93000034536 (1)

FILED

98 APR 22 PM 1: 15

1. Corporation WHERE		HOUSE, INC.	00004000	, (1)			i	SECRETARY OF S' TALLAHASSEE, FL			
Principal Place of Business Mailing Address								- 10041001 110 11100 11110 00111 00111 00111	AL BYON BUILD HE		
555 JEFFERSO MIAMI BEACH US	ON AVENUE		555 JEFFERSO	555 JEFFERSON AVENUE MIAMI BEACH FL 33139 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/06/1993			
2. Principal P	lace of Busin	iess	2a. Mailing Ad	2a. Mailing Address				4. FEI Number	- Ar	oplied For	
21			26	-1-1				65-0419789	No	ot Applicable	
Suite, Apt.	#, etc.		<u>}</u>	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	
City & State	Α		City & Stat	City & State				C Flastice Companies Financing	Fee Re	<u> </u>	
23	•		├─ ┐ ´	28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	- *	
Zip				Zip Country				8. This corporation owes or has paid the co			
24	25		29	30			Personal Property Tax due June 30. Yes			No	
	 -		irrent Registered Agen	gistered Agent		Name		10. Name and Address of New Registered	Agent		
		ERPRISES, INC.			81 82						
	JEFFERSO MI B EACH						et Address (P.O. Box Number is Not Acceptable)				
14/11/4	IMI DEACH	1 5 00 100									
						City			85 Zip	Codo	
						,		FI	. ` `		
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 a office or registerod agent, or both, in the State of Llorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										s registered registered	
SIGNATURE	Stansture typed	or numed name of moreters	od agent and title if applicable	(NOTE Boo	istered Agr	ent signature	bayinan e	f when reinstating) DATE	~ 		
12.	a grant of types		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12	
TITLE	PD		K	DELETE	1.1 TITLE		PD		Change	Addition	
NAME		V JR., EMILIO			1.2 NAME			lio Estefan, Jr.			
STREET ADDRESS	6205 BIR				1.3 STREET		1	Jefferson Avenue		[]	
CITY-ST-ZIP TITLE	MAMI FL STD	·			1.4 CITY - S 2.1 TITLE	T-ZIP		mi Beach, FL 33139	Change	Addition	
NAME		N, GLORIA	*		2.2 NAME		1	VPSTD K ^{runnge} l Gloria M. Estefan		7.501.101	
STREET ADDRESS	6205 BIR			2.3 STREET ADDRESS		ADDRESS		Jefferson Avenue			
CITY-ST-ZIP	MIAMI FL				2. 4 CITY - S	ST-ZIP	1	mi Beach, FL 33139			
TITLE	A\$		X	DELETE 3.1 TITL			VP	in Doddiy 11 33107	Change	X Addition	
NAME), REBECCA			3.2 NAME		1	nk Amadeo			
STREET ADDRESS	6205 BIR				3 3 STREET		1	Jefferson Avenue			
CITY-ST-ZIP TITLE	MAMI FU C		 X 1		3.4. CITY - ! 4.1 TITLE	ST - ZiP	Mia	mi Beach, FL 33139	Channe	Addition	
NAME	-	DEZ, LUIS F.	_	1	4. 2 NAMÉ			700002503	4 î 7·	7	
STREET ADDRESS	6205 BIR				4.3 STREET	ADDRESS	1	70000250 3 -04/ <u>28/</u> 98	01086	005	
CITY-ST-ZIP	MIAMI FL				4.4 CITY - S			***2700.00	****1		
TITLE				DELETE	5.1 TITLE				Change	Addition	
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREET						
CITY-ST-ZIP TITLE					5.4 CITY - S 6.1 TITLE	I - ZIP			Change	A itibba	
NAME					6.2 NAME					48, PO	
STREET ADDRESS				6.3 STREET ADDRE		ADDRESS	1		~(1201	
							ł			Uaf i	

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 supplemental armual 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 exportation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chlundal, or an an attachment with moddress.