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 #

P93000042389 (5)

Principal Place of Business	Mailing Address		
3049 NE 163 STREET NO MIAMI FL 33160	3049 NE 163 STREET NO MIAMI FL 33160		

FILED Apr 24 1998 8:00am Secretary of State

1. Corporation SARRIA		1000 12000 (0)			
OMNIN	1, 1140.			# 3 M T 1 M	
Principal Place	e of Business	Mailing Address		T INDISADA 140 TATOR (1114 BDVI) DDVII ODVII ODVII OLOID 11000 DVIID 1816 LOIY 1881	
3049 NE 163 NO MIAMI FL		3049 NE 163 STREET NO MIAMI FL 33160		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
-				06/16/1993	
2. Principal P	lace of Businoss	2a. Mailing Address		4- FEI Number Applied For	
21		26		65-0420632 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		SR 75 Additional	
22		27		5. Certificate of Status Desired Fee Required	
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28	····_	Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25 25 Name and Address of Cu	29 30	0	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
148		ment Registered Agent	81 Name-	10. Name and Address of New Registered Agent	
	IITE NANCY			Theodore J. Klein Atty	
3049 NE 163 CT			82 Street A	Address (P.O. Box Number is Not Acceptable)	
N.	MIAMI FL 33160		83	NE 168E Street	
			84 City	10 rth Mami Beach FL 85 33162	
11. Pursuant t	to the provisions of Sections 607	7.0502 and 607.1508. Florida Statutes.	the above-named	corporation submits this statement for the purpose of changing its registered	
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 Florida. 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.					
	The land with the company of the com	T.	sa ciardics.	3//2/48	
SIGNATURE	Signature, typed or printed name of registers	ed agent and title if applicable (NOTE A	legistered Agent signature		
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	☐ DELETE	1.1 TITLE	Change Addition	
NAME	SREDNI ISAAC		1.2 NAME	2875 NE 191 Street PH-1	
STREET ADDRESS	3049 NE 163 ST		1.3 STREET ADDRESS	2875 NE 191 Street PH-1 Tumperry Plaza	
CITY-ST-ZIP	N. MIAMI FL	DELETE	1.4 UTY-ST-ZIP	Aventura, F) 33180	
TITLE	POEDMI MIDIAM	□ perei€	2 1 TITLE		
NAME	\$ REDNI, MIRIAM \$049 NE 163 ST.	,	2.2 NAME	2875 NE 191 Street PH-1 Turnberry Plaza	
STREET ADDRESS	N MIAMI BCH. FL		2.3 STREET ADDRESS	Turnberry Plaza	
CITY-ST-ZIP TITLE	N MIAMI DON, PL	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	Aventura, F1 33180 Change Addition	
NAME		_ outre	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-\$T-ZIP			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			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			64 CITY-ST-ZIP		

Hing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information al report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an Justice employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address 14. I hereby certify that the information supplied with this filting does not quali indicated on this annual report or supplement annual report is true and officer or director of the corporation or the roceiver or busiee empowered Block 12 or Block 13 if changed, or or an attachment with an address

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