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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 26 1998 8:00am

Secretary of State

345-374-0474

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000050509 (7)

EDGE VENTURES, INC.

Principal Place of Business

37 NE 15TH S MIAMI FL 3313		37 NE 19 MIAMI FI	STH STREET L 33132				DO NOT WRITE IN THIS SPA	ACE		
							07/14/1993			
⊢ ¬ '	lace of Business	2a. Mailir	2a. Mailing Address				4. FEI Number	Ar	optied For	
21		26	. 				65-0428959	No	ot Applicable	
Suite, Apt.		Suite,					5. Certificate of Status Desired	5. Certificate of Status Desired Security Securi		
City & State	е	City 8	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country Zip			Country			8. This corporation owes or has paid the curren	t vear in	angible	
24	25	29	ľ	30			Personal Property Tax due June 30.	_] No	
	9. Name and Address of Curr	ent Registered	Agent				10. Name and Address of New Registered Agent			
ALE	MAN, SANDRA M			81	١]	Name				
	NE 15TH STREET		82 Street Add		Street A	Address (P.O. Box Number is Not Acceptable)				
	MI FL 33132			"	1	On Cot 7	Address (1.0. box Halliber is Not Acceptable)			
				83	3	•				
				84	+	City		7.0	Code	
				"	1	City	FL	B5 Zip i	Coue	
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 familier with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS A	AND DIRECTORS		13.	_	<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND D	RECTOR	IS IN 12	
TITLE	PO		DELETE	1.1 TITLE				Change	Addition	
NAME	ALEMAN, SANDRA M			1.2 NAME						
STREET ADDRESS	37 NE 15TH STREET			1.3 STREE	ET AI	DDRESS				
CITY-ST-ZIP	MIAMI FL			1.4 C/TY -	ST-	ZIP				
TITLE	\$TD		DELETE	2.1 TITLE				Change	Addition	
KAME	MINDLIN, CINDY R.			2.2 NAME						
STREET ADDRESS	37 NE 15 ST			2.3 STREE	T AI	DDRESS				
CITY-ST-ZIP	MIAMI FL			2.4 CITY	-ST-	- 71P				
TITLE			☐ DELETE	3.1 TITLE			L.	Change	Addition	
NAME				3.2 NAME		1				
STREET ADDRESS				3.3 STREE	TAE	DDRESS				
CITY-ST-ZIP	<u> </u>			3 4. CITY-		- ZIP				
TITLE			L_ DELETE	4 1 TITLE		}		Change	Addition	
NAME				4. 2 NAME	Ē					
STREET ADDRESS				4.3 STREE	T AC	DDRESS				
CITY-ST-ZIP			Driese	4.4 CITY-		ZIP	<u> </u>		1 1 1 1 1 1 1 1 1	
TITLE			☐ DELETE	5.1 TITLE			H	Change		
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREE	T AI	DORESS				
CITY-ST-ZIP			DOLETE	5.4 CITY-	ST-	ZIP		Db	A same	
TITLE			☐ DEL ete	6.1 TITLE			U	Change	Addition	
NAME				62 NAME						
STREET ADDRESS				6.3 STREE		1				
CITY-ST-ZIP	adification that information and the Co.	wish ship 50 cm.		6.4 CITY-			dia Castia, 440 07/0V3 Flagge St. Lea 17 W			
indicated officer or r	on this annual report or suppleme	ntal annual report	t is true and accu	irate and th	at	my sign	d in Section 119.07(3)(i), Florida Statutes. I further certify nature shall have the same legal effect as if made under required by Chapter 607, Florida Statutes; and that my r	oath; tha	at I am an	