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

P93000059475 (2)

FILED Apr 21 1998 8:00am Secretary of State

	ivestments of Miami, II	N G.			
Principal Pla	ce of Business	Mailing Address			ISB IDSTENDING SEMBAN BSES SAME
3728 NW 43		3728 NW 43RD ST			
MIAMI FL 33	3142	MIAMI FL 33142		DO NOT WRITE IN THIS	PDACE
				3. Date Incorporated or Qualified	SPAUL.
				08/25/1993	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0463000	Not Applicable
Suite, Apt	t #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		Cermicate of Status Desired	Fee Required
City & Sta	nie	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	T. Country	28		Trust Fund Contribution	Added to Fees
24	Country 25	Ζφ	Country	8. This corporation owes or has paid the cu	` _ `
24	9, Name and Address of Curr	29 rent Registered Agent	30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
SI	MOLER BRUCE J		B1 Name	10. Manie and Address of New Hogistered	Agont
	00 SE 2ND ST		00 00 00	(200	
	JITE 3940		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	IAMI FL 33131		83		
			84 City		Test as Automotive
			1 1 1	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508, Florida State	ules, the above-named cor	poration submits this statement for the purpose o tion's board of directors. I hereby accept the app	f changing its registered
agent. I a	am familiar with, and accept the ob	ligations of, Section 607.0505, f	Florida Statutes.	ilidits board of directors, I herdby accept the app	pointment as registered
SIGNATURE					•
12.	Signature typed or printed name of nigetime d	agent and title if applicable (NO AND DIRECTORS	Tit. Registered Agent signature requ		
TITLE	T D	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	
NAME	GROLL, PAUL		1.1 (11)		
STREET ADDRESS	3728 NW 43RD ST		1.2 NAME		Change Addition
CITY-ST-ZIP			1.2 NAME 1.3 STREET ADDRESS		Change Aboution
	MIAMI FL 33142		1.3 STREET ADDRESS		Citalize [] Adollion
TITLE	MIAMI FL 33142				Change Addition
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Thereby certify that the information supplied with this fitting 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 annual 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 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 changed, or or an absolute with an address.

PAYL GAOLL

16/08/2007620,5922