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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000062789 (1)

REGIONAL INC.

**FILED** May 07 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			-{	1 001f0 01f16 1f011 1001	i ibila idis idel
1850 SW 8TH STREET	1850 SW BTH STREET					
SUITE 312	SUITE 312					
MIAMI FL 33135 MIAMI FL 33135			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified 09/03/1993		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21	26			65-0435580	_ / [	Not Applicable
Suite, Apt. #, etc.	e, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional
22	27			S. Certificate of Status Desired	Fee	Required
City & State	City & State	l l		6. Election Campaign Financing		00 May Be
23	28			Trust Fund Contribution		led to Fees
Zip Country	Zφ	Country	<b>!</b>	8. This corporation owes or has pai	m/ -	r Intangible
24 25		30		Personal Property Tax due June  10. Name and Address of New Re		
9. Name and Address of Current	Liedizieled Waliif	81	Name	10. Menia Bilo Addiess of New Asi	Merened Myork	
LEWIS, RICHARD C						
799 BRICKELL PLAZA		82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)	
SUITE 702		63	ļ			
MIAMI FL 33131			1			
		64	City		FL 85	Zip Code
11. Pursuant to the provisions of Sections 607.0502	2 and 607 1508 Florida Statute	es the hov	e-named corn	poration submits this statement for the p		ng its registered
office or registered ersent or both, in the State	ol Florida. Such channa was a	utbori di b	y the corporati	ion's board of directors. I hereby accep	t the appointmen	t as registered
agent I am familiar with, and accept the obliga	itions of, Section 607.0505, Flo	orida Saute	<b>S</b> .			
SIGNATURE Signature typed or printed name of registrated ager	at and title if anniumable (NOTE	E Registe 1 Ag	ent signature require	red when reinstating)	DATE	
12. OFFICERS ANI		18		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
TITLE D	DELETE	1.1 ILE			☐ Char	nge 🔲 Addition
NAME ATHANS, GEORGE		1.2 AME				l;
STREET ADDRESS 1850 SW 8TH ST., STE. 312		1.3 STREE	ADDRESS			li li
CITY-ST-ZIP MIAMI FL 33135		1.4 OTY-	ST-ZIP			
TITLE	☐ DELETE	2.1 TILE			L Chai	nge L. Addition (
NAME		2.2 NAME				l
STREET ADDRESS		2 3 STREE	ADDRESS			
CITY-ST-ZIP		2. 4 CITY-	ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE			L Cha	nge LIAddition
NAME		3.2 NAME				İ
STREET ADDRESS		3.3 STREE	T ADORESS			
CITY-ST-ZIP		3.4. CITY-	ST-ZIP			T A A Pro-
TITLE	☐ DELETE	4.1 TITLE			☐ Cha	nge L_I Addition
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREE	T ADDRESS			İ
CITY-ST-ZIP		4.4 CITY-	ST-ZIP		1"   05-	and Addition
TITLE	DELETE	5.1 TITLE			☐ Cha	nge L. Addition
NAME		5.2 NAME				ļ
STREET ADDRESS		5 3 STREE	T ADDRESS			1
CITY-ST-ZIP		5 4 CITY	ST-ZIP		Пос	nno Indebion
TITLE	☐ DELETE	61 TITLE			☐ Cha	nge L Addition
NAME		6.2 NAME				
STREET ADDRESS			T ADDRESS			1
City-SI-ZIP	th this filing shows at a set 2. 4.	6.4 CITY-		Section 119 07/3VI) Florida Statutos I	further certify the	t the information

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)f), Florida Statutes. I intrifer certify that the information indicated on this annual report or suppliemental 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 organ attachment with an address.

305-541-5050