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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	NVESTMENT CORPORATION	0072674 (3) N				
Principal Place	e of Business	Mailing Address			- I IDDIIQDI (ID IDIDO III) BBIII BOIN B	BIST BOSTS SÕUSE STOLO BISTS TÜÜST OLDE (GB:
1161 HOLLAND DRIVE 1161 HOLLAND DRIVE						
SUITE 301A BOCA RATON FL 33487		SUITE 301A BOCA FIATON FL 334B7		DO NOT WRITE IN THIS SPACE		
US		US		3. Date incorporated or Qualified		
					10/12/1993	
		2a. Mailing Address	dress		4. FEI Number	Applied For
		26	- 4 4 - 1 - 1		65-0445437	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
L '		City & State	& State		6. Election Campaign Financing	\$5.00 May Be
23	Zip Country 7ip		Country		Trust Fund Contribution	Added to Fees
24	25 29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	25 29 30 30 30 30 30 30 30 30 30 30 30 30 30			10. Name and Address of New Registered Agent		
SU	CHER, MICHAEL		81	Name		
1161 HOLLAND DR.			82	Street Addre	ss (P.O. Box Number is Not Accepta	hie)
BOCA RATON FL 33487				Officer Addition	33 (1:0. Dox Number 13 Not Accepta	
			83		•	
			84	City		85 Zip Code
44 0	607.010	0 - 1007 1500 El : 1 Ct-1				FL 63 Zip Code
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. SIGNATURE						
	Signature typod or printed name of registered age: OF FICERS AND		Registered Agen	t signature require:	d whon reinstating) ADDITIONS/CHANGES TO OFFI	DATE OFFICE ANICADIMECTORS IN 12
12.	DPST	DELETE	1.1 TITLE	——————————————————————————————————————	ADDITIONS/CHANGES TO OFFI	Change Addition
NAME	SUCHER, MICHAEL		1.2 NAME			
STREET ADDRESS	1 4 4 4 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6		1.3 STREET ADDRESS		HollAND	22111D
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST	- ZIP		334011/
TITLE	DST	☐ DELETE	2.1 TITLE			Change Addition
NAME	9,000,000		2.2 NAME			
STREET ADDRESS	1161 HOLLAND DRIVE		2.3 STREET ADDRESS 2.4 CHY-SI-ZIP			33487
CITY-ST-ZIP TITLE	BOCA RATON FL			- ZIP		☐ Change ☐ Addition
NAME	ÖV □ DELETE SUCHER, PHYLLIS		3.1 TITLE 3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	M 117 112 M M M M 101 101 M M M 101 101 M		3.4. CITY-ST-ZIP			(/
TITLE	V DELETE		4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change Addition
NAME	SUCHER, ANNA		4. 2 NAME			✓
STREET ADDRESS			4.3 STREET ADDRESS			23/18/2
CITY-ST-ZIP	BOCA RATON FL		4.4 Crt Y - ST - ZIP			00107
TITLE	DELÉTE :		5.1 TITLE			☐ Change ☐ Addition
NAME eteret anderee			5.2 NAME	DDDECC		
STREET ADDRESS			5.3 STREET A			
CITY-ST-ZIP TITLE	······································	DELETE	5.4 CITY-ST	- 611"		Change Addition
NAME	_		6.2 NAME	}	. –	
STREET ADDRESS			6.3 STREET A	DDRESS		
CITY-ST-ZIP			6.4 CITY-ST			
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 annual report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am an						
Indicated on this annual report or supplemental amount 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 physicises to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or on an attestiment with an indicess.						