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 # P93000075109 (7)

Principal Plac		Mailing Address			
419 ESPANOLA WAY SECOND FLOOR MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139				DO NOT WRITE IN THIS SPACE	
US DEACH	1 FL 33139	US		3. Date Incorporated or Qualified	10017102
				10/29/1993	
 -	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
Suite, Apt	# etc	Suite, Apt. #, etc.		65-0445557	Not Applicable \$8.75 Additional
22	., .	27		5. Certificate of Status Desired	Fee Required
City & Stat	10	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζ(p	Country	8, This corporation owes or has paid the	
24	25 g. Name and Address of Curre		30]	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yos No
МА	IRX, JAMES		81 Name		
	D S.E. 2ND AVE.		B2 Street Add	ress (P.O. Box Number is Not Acceptable)	
SUITE 500		<u> </u>	Total (1.6. Box Namber to Not Not place)		
MIA	AMI FL 33131		83		
			84 City		85 Zip Code
44 Puravent	to the manifelium of Custinus CO7/06	00 and 607 15 00 Horido Statute	the shave pared sor	possion subspite this statement for the surresp	L of phonoina its registered
office or r	registered agent, or both, in the Stat	le of Herida, Such change was a	uthorized by the corporal	poration submits this statement for the purposition's board of directors. I hereby accept the a	appointment as registered
	m t am iliai with, and accept the obli	gations of, Section 607.0505, Fig	rida Statutes.		
SIGNATURE	Signature Type dioc printed harve of require dia	gent and the Pappic ablo (NOTI	Registered Agent signature requi	red when reinstating) DATI	
12.		ND DIRI CTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	☐ DELETE	1.1 TITLE		Change Addition
NAME	PAGE, PETER		1.2 NAME		
STREET ADDRESS	419 ESPANOLA WAY		1.3 STREET ADDRESS		
CITY-ST-Z#P	MIAMI BEACH FL VPSD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	KENNEDY, PATRICK		2.2 NAME		CT cutaility
STREET ADDRESS	419 ESPANOLA WAY		23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	31 THILE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-7IP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Lorete	4.4 CITY - ST - ZIP		Change Buttle -
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-SI-ZIP 6.1 TITLE		Change Addition
		L. Petere	6.2 NAME		
NAME Street address			6.3 STREET ADDRESS		
SINCE ADDRESS			B.3 STREET AUUNESS		

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 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 account of the corporation or the account of the corporation or the account of the corporation of the account of the corporation or the account of the corporation of the account of the a

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May 22 1998 8:00am

Secretary of State