SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Malling Address

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075703 (7)

SIXTA FINANCIAL, INC.

Principal Place of Business

CITY-ST-ZIF

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

TITLE

NAME

TITLE

NAME

TITLE

NAME

1617 NORTH FLAGLER DR. WEST PALM BEACH FL 33407		P. O. BOX 33209 PALM BEACH GARDENS FL 33420 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/02/1993		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For	
21	26				65-0446167	Not Applicable		
Suite, Apt	l. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ate	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Ζίρ 29]	30	ountry	,	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible Yes No	
ļ	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
535 SUI BO0	ASE, MARIAN P 5 TOWN CENTER RD TE 801 CA RATON FL 33486 Int to the provisions of sections 607.05 r registered agent, or both, in the Statem familiar with, and accept the obli	te of Florida. Such change	was authoriz	ed by	City named corp	FL poration submits this statement for the purpose of chation's board of directors. I hereby accept the appoint	85 Zip Code anging its registered	
SIGNATURE	Signature, typed or printed name of registered ag	pent and title if applicable	(NOTE Regis	lered A	oent signature re	equired when reinstating) DATE		
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	DP BESTENHEIDER, JACQUES	DELET	rE 1.1	TITLE			Change Addition	
STREET ADDRESS	AAAR MARTILES AAARA AA	7		STREET CITY-ST	ADDRESS			
TITLE	DELETE			2.1 TITLE			Change Addition	
NAME		L. DELE		NAME			L Change L Addition	
STREET ADDRESS			2.3 9	TREET	ADDRESS		,	
CITY-ST-ZIP				CITY-ST	ZIP			
TITLE		DELE1	TE 3.1 7	TITLE			Change Addition	
NAME			3.2 1	NAME				
STREET ADDRESS			3.3 8	TREET	ADDRESS		/	

6.4 CITY-ST-ZIP

14. I hereby 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 eignature 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 on an attachment with an address.

1011/24 The 11/24 The 11/2

3.4 CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

CR2E034 (5/98)

FILED

Aug 12 1998 8:00am

Secretary of State

300002617313 -08/17/98--01063-**104**040000

***150.00

Sixta Financial, Inc.

Ofs

July 28, 1998

Fiorida Department of State Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

Dear Sirs:

This is in reference to the attached 1998 Profit Corporation Annual Report Packet (2nd notice). Please note that we have never received the first notice.

After consulting today with your office in Tallah assee, they suggested that we file the 2nd notice immediately, with a \$150.00 fee, and this letter of explanation.

Thank you.

Sincerely,

Enclosures

P.O. Box 33209 • Palm Beach Gardens, FL 33420 Phone: (561) 622-2160 • Fax; (561) 622-9605