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

PROFIT CORPORATION

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90054 004 ***150.00

1. Corporation	Name # P930000	J02303			
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Principal Place	e of Business	Mailing Address			181
235 LINCOLN F		235 LINCOLN RD.			
STE 320 STE 320					
MIAMI BEACH FL 33139-3157 MIAMI BEACH FL 33139-3157				DO NOT WRITE IN THIS SPACE	—
				3. Date incorporated or Qualifed	ļ
2 Onto alm at Of	in the second se	2a. Mailing Address		12/02/1993 4. FEI Number Applied For	
— <u>¬</u>	lace of Business	26		65-0453999 Not Applicat	
21 Suite, Ant.	#_etc	Suite-Ant-#: etc.=		S8-75 Additional	
22	,	27	•	5. Certificate of Status Desired	
City & State	e ·	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	ļ
24	25	29 30	o\	Personal Property Tax. Yes XINo	
	9. Name and Address of Current	Registered Agent	04 1	10. Name and Address of New Registered Agent	
DAD	D NICHOLAS		81 Name	Eric S. Flores	ļ
PAPP, NICHOLAS			82 Street A	Address (P.O. Box Number is Not Acceptable)	
235 Lincoln RD. Ste. 320			83 6	35 Lincoln Road	
	MI BEACH FL 33139-3157		[°3] S	vite 320	}
IVIIA	WI DESCITTE 30109-3107		84 City		
44 6	+ #	and CO7 1500 Florida Statutos	the above period a	Jam Beach FL 33/39	d l
office or re	egistered agent, or both, in the State	Florida. Such change was auth	norized by the corpor	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	.]
agent. I a	m familiar with, arty accept the obligation	ons of, Section 607.0505, Florid	a Statutes.	, /	
		Equ.	C FINDE	'	
SIGNATURE	_ cul 1. The	ERIC	S. FUFE	//5 /99	}
SIGNATURE	Signature, typed or printed name of registered agent a OFFICERS AND	and title if applicable. (NOTE: Re	S. FLOKE	acquired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
	Signature, typed or printed name of registeral agent of	and title if applicable. (NOTE: Re	S. FLOFE agistered Agent signature re 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
12.	Signature, typed or printed name of registered agent a OFFICERS AND	and title if applicable. (NOTE: Re	S. FLOFE agistered Agent signature re 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
12. TITLE	Signature, typed or printed name of registered agent a OFFICERS AND PST PAPP, NICHOLAS 360 MERIDIAN AVE. #6-E	and title if applicable. (NOTE: Re	S. FLOFE agistered Agent signature re 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
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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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the ecceiver 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

MENTS PLANES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR