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

**PROFIT** CORPORATION ANNUAL REPORT

1998

TITLE

NAME STREET ADDRESS

TITLE

TITLE

TITLE

CITY-ST-7IP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P9400005050 (7) DOCUMENT #

CORBITT & COMPANY, INC.

Principal Place of Business Mailing Address 7400 MONACO STREET 7400 MONACO STREET **CORAL GABLES FL 33143** CORAL GABLES FL 33143 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/20/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0461730 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State 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 or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORBITT, RONALD E JR. 7400 MONACO ST Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33143** 83 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITUE Change TITLE CORBITT, RONALD E JR. NAME 1.2 NAME 7400 MONACO ST. STREET ADDRESS 1.3 STREET ADDRESS CORAL GABLES FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE CORBITT, AURELIA F NAME 2.2 NAME 7400 MONACO ST. STREET ADORESS 23 STREET ADDRESS CORAL GABLES FL CITY-ST-ZIP 2.4 CITY - ST - ZIP

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CiTY-ST-7(P 6.4 CITY-ST-ZIP 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 of 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 of the receiver of trustee impowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if chapter 607 or on an attact ment with a radigless.

3.1 TITLE

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

44 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - S1 - ZIP

3.3 STREET ADDRESS 3.4. CITY - ST - 2IP

SIGNATURE

FILED

Jan 26 1998 8:00am

Secretary of State

Addition Addition

Addition

Addition

Addition

Addition

Change

Change

Change