## 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

## POCUMENT # P94000017455 (4)

3D PROPERTIES & INVESTMENTS, INC.

FILED Feb 09 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						L LOOKINGT FIR INITE DEAL BOLL BRILL BRILL BRIEL INDIE IRDET BIRDT DIENT DIENT DIENT DIENT DIENT DIENT DIENT DIENT
3745 N.E. 171ST 3745 N.E. 171ST						
SUITE 42 NORTH MIAMI BEACH FL 33160		SUITE 42	SUITE 42 NORTH MIAMI BEACH FL 33160			DO NOT WRITE IN THIS SPACE
NORTH MIRMI DESCRIPE 33100 NORTH MIRMI BESCHIP			IGM FL 33160	33100		3. Date Incorporated or Qualified
						02/28/1994
2. Principal Place of Business 2a. Mailing Address			<del></del>	••••		4. FEI Number Applied For
21		26	26			65-0475560 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.			SR 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & Stat	е	City & State				6. Election Campaign Financing \$5.00 May Be
23 28						Trust Fund Contribution Added to Fees
Zip	Country	Zip	<b></b>	untry	У	8. This corporation ewee or has paid the current year Intangible
24	25	[29]	30			Personal Property Tax due June 30. 🔀 Yes 🔲 No
9. Name and Address of Current Registered Agent				04	T	10. Name and Address of New Registered Agent
	CCLAIN, DAVID			81	Name	<b>)</b>
3745 N.E. 171ST STREET				82	Street A	t Address (P.O. Box Number is Not Acceptable)
SUITE 42				<u></u>	. 1	
NORTH MIAMI BEACH FL 33160				83		
				84	City	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508, Florida 9	Statutes, the a	- abov	e-named	d corporation submits this statement for the purpose of changing its registered
Office or r	egistered agent, or both, in the Stamming with, and accept the ob-	ate of Florida. Such change:	was authorize	ed be	v the corp	rporation's board of directors. I hereby accept the appointment as registered
-	in reminal with, and accept the op	ilgations of, Section 007.000	o, i londa ole	XIU(6	S.	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Register				ed Age	ent signature	re required when reinstating) DATE
12. OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELET	E 1.1 1	IITLE		Change Addition
NAME	MCCLAIN, DAVID		1.2	1.2 NAME		
STREET ADDRESS 3745 NW 171 STREET, SUITE 42			1.3 9	1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI BEACH FL			1.4 CITY - ST - ZIP		
TITLE	D	☐ DELETI	TÉ 2.1 TITL			Change Addition
NAME	WHEELER, TIM		2.2	2.2 NAME		<u> </u>
STREET ADDRESS			2.3 9	2.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI BEACH FL		2.4	2. 4 CITY - ST - ZIP		•
TITLE	D	DELETI	É 3.1 T	3.1 TITLE		☐ Change ☐ Addition
NAME	= - · · ·==/ · · · · · · · ·		IAME			
STREET ADDRESS			338	3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4.	3.4. CITY-ST-ZIP		
TITLE		☐ DELETI	E 4.1 T	1TLE		☐ Change ☐ Addition
NAME			4.2	NAME		

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 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

CICNIATURE.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

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12-AGB 0202

Change

Addition

Addition