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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



**DOCUMENT #** P94000022678 (4)

**FILED** Apr 21 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS

STACH	HE INVESTMENTS, INC.	- ( )			
Principal Plac	ce of Business	Mailing Address		E FOURIDATE NO AGRECULET URBERT DELLE OREN DE CHI	41010 11810 06168 1000 1801 1001
3020 NW 75TH STREET MIAMI FL 33147		3020 NW 75TH STREET MIAMI FL 33147		DO NOT WRITE IN TH	HE CRACE
				3. Date Incorporated or Qualified	IS SPACE
				03/21/1994	
2. Principal F	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0484442	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
<b>Z</b> ip <b>24</b>	Country 25	Zip   <b>29</b>	Country 30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	current year Intangible ☐ Yes ☐ No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Register	ed Agent
	HEN, BYRON		81 Name		
3020 NW 75TH STREET			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
MI	AMI FL 33147				
			83		
			84 City		85 Zip Code
44.5		~"			L
office or r agent. La	to the provisions of Sections 607.050, registered agent, or both, in the State am familiar with, and accept the obliga	z and 607,1908, Florida Statut of Florida: Such change was a Hons of, Section 607,0505, Flo	os, the above-hamed coulingrized by the corporida Statutes.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered a per		: Registered Agnor signature re		
12. TITLE	OFFICERS AND	DILETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	STANG, ALAN H	C Meete	1.2 NAME		
STREET ADDRESS	1585 DAYTONIAR RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CHY-S1-ZIP		
TITLE	D	DELETE	21 TITLE		Change Addition
NAME	STANG, PATRICIA M		22 NAME		-
STREET ADDRESS	1585 DAYTONIA RD		2 3 STHEET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		2 4 City-St-ZiP		
TITLE	D	DETETE	3.1 TITLE		Change Addition
NAME	CHEN, BYRON		3.2 NAME		
STREET ADDRESS	1130 NW 93 AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBRIKE PINES FL	r 🗂 ilitais	3.4. CHY - S1 - ZIP		
TITLE	OUTH OLAUDETTE E	DELETE	4.1 3   1 LE		Change Addition
NAME	CHEN, CLAUDETTE E		4. 2 NAME		
STREET ADDRESS	1130 NW 93 AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL	foretar	4.4 CITY - ST - 7IP		Change L Address
TITLE		LJ DELETE	5.1 TITLE		Change Addition
NAME expect approved			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-ST-ZIP 6.1 THLE		Change Addition
NAME		[] D((( ) E	6.2 NAME		□ change □ roullon
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	Land of the land o	n area en la	6.4 CITY-ST-ZIF	100010000000000000000000000000000000000	

r nereby coruly 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 informatio indicated on this annual report or suppliemental 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

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