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

PROFIT CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State **19**98 DOCUMENT # P94000024708 (7) HIGHLAND INVESTMENTS, INC. Principal Place of Business Mailing Address 7045 NW 46TH ST 7045 NW 46TH ST MIAMI FL 33136 MIAMI FL 33136 2. Principal Place of Business 28. Mailing Address 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State City & State 23 28 Zip Country Country 25 29 30 24 9. Name and Address of Current Registered Agent 81 ZAMORA, ENRIQUE 901 PONCE DE LEON BLVD 82 **SUITE 502** 83 **CORAL GABLES FL 33134** 84 Signature, type dioriphoted name of regestered a percincil Hill Lapple about 12. OFFICERS AND DIRECTORS 13. DELE TE 11 TITLE TITLE **RODRIGUEZ, CARLOS** NAME 1.2 NAME

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED May 21 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/31/1994 4. FEI Number Applied For 65-0483809 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City 85 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. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 Change Addition 7045 NW 46TH ST STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33136** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **DE CESPEDES, EDUARDO** NAME 2.2 NAM 7045 NW 46TH ST STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33136** CITY-ST-ZIP 2 4 CITY-S1-ZIP DELETE Addition Change 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6 4 CITY - 51 - ZIP 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 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 trusted 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 arraddress